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MONTANA
DEPARTMENT OF INSTITUTIONS

DIVISION MENTAL HEALTH AND RESIDENTIAL SERVICES NEWS

VOLUME 2 MARCH, 1983 NUMBER 1

Capital Capsule

We are in the midst of another Legislative Session and many bills have been introduced which will affect mental health services, developmental disabilities services and the department. An update of legislation will be included with this newsletter.

As of February 21, 1983, all initial hearings of the Appropriations Subcommittee for the department have been completed.

In January, 1983, staff of the Mental Health and Residential Services Division conducted a followup site review of the mental health center offices in Glasgow, Glendive and Miles City. The purpose of the visit was to review actions taken to bring the Center into compliance with its contract with the Department of Institutions. Review of the Region V mental health center has been scheduled for March 23-24, 1983. Reviews will be conducted in the remaining regions before the end of the fiscal year.

Charles Briggs has been appointed as the Governor's Coordinator for Aging Services. Mr. Briggs will coordinate and plan services for Montana's senior citizens and will be located in the Governor's Office.

Private Practitioner Study

In an effort to determine the total picture of mental health services in Montana, the Manpower Development Program of the Mental Health and Residential Services Division has contracted for a study of private practitioners in mental health across the state. Rod Gwaltney of Helena was awarded the contract for the study.

Questionnaires have been mailed to psychiatrists, licensed psychologists, masters-level social workers, masters-level psychiatric nurses, school pscholegists, school counselors and others to determine the extent and nature of their private practice.

The Mental Health and Residential Services Division plans to publish a resource directory of private practitioners as a result of the findings. To date, more than 600 professionals have returned the questionnaire. The survey should be completed by March 15, 1983.

Developmental Disabilities Contract Advisory Council

(By Peter Blouke, Administrative Officer, Mental Health and Residential Services Division)

During the past six months, I have participated as a member of the Developmental Disabilities Contract Advisory Council (DDCAC) and enjoyed the opportunity to observe the structure and relationship between the community-based programs providing services to developmentally disabled persons and the Developmental Disabilities Division (DDD) of SRS. In many ways, the concerns, and problems are reminiscent of our own Division/CMHC contract relationship.

The DDCAC was formally established by Governor Schwinden in August of 1982 to deal with problems associated with the contract negotiations between the DDD and community programs. Membership on the eleven member council includes local providers, DDD staff, a representative of the Developmental Disabilities Planning and Advisory Council, and two members unaffiliated with the DD programs — Larry Fasbender as chairman and myself.

For those in the CMHC system who believe the Department of Institutions produces a restrictive and lengthy contract, I would encourage you to peruse the DDD contract with local providers (a 51-page document). Compounding the normally inherent problems between a state agency statutorily responsible for both the fiscal and programatic aspects of DD programs and the local contract agency that administers the program is the sheer number and variability of programs within the DD community system. There are 58 separate corporations that contract with DDD ranging from a transportation contract for less than $3,000 to one of $676,000 to a large corporation that provides group home and day care services in several different towns.

The problems identified with the contract processes are commensurately numerous and varied. Some of the more significant issues that the Council is addressing include development, implementation and monitoring of standards, recommendations for an overall assessment of the organizational structure of the community programs, policies promulgated by the DDD, contract related income (aka reserves), uniform funding, and definition of services provided. Although we have not yet resolved the larger issues, I have been impressed with the commitment and effort that both the DDD staff and providers have put forth. The dialogue surrounding these issues have been productive and the spirit of cooperation and willingness of both parties to reach a compromise that will improve services to clients is commendable. I am, however, thankful for the regional structure of our own CMHC programs and the fact our negotiations are limited to five rather than 58 different corporations.

FROM THE FIELD
INSTITUTIONS

Boulder River School and Hospital

On November 29, 1982, Boulder River School and Hospital was presented a framed certificate of recognition by Ed Argenbright of the Office of Public Instruction on behalf of the Regional Office of the U. S. Department of Education. The Boulder program was one of four exemplary educational programs in the state nominated by the National Year of Disabled Person's State Liaison for recognition of educational programs that have been of particular benefit to disabled people. Boulder also received a letter of congratulations from Governor Ted Schwinden and from the U. S. Department of Education with a wish for continued success in service to the disabled. This is a great honor and congratulations also go out to Boulder from all of us.

Center for the Aged

The following staff members from the Center for the Aged participated in a staff exchange program with Warm Springs/ Galen State Hospital: Anne Gagne, Director of Nursing; Douglas Barnes, Recreation Therapist; Helen Jenni, Resident Work Program Supervisor; and Don Ackerman, Director of Clinical Support Services. This program was sponsored by the Manpower Development Project of the Department of Institutions. The Center staff was welcomed at Warm Springs by Tom Sellars, Chief Executive Officer and Mrs. Jane Edwards, Acting Director of Treatment and Residential Services, who served as the coordinator for the first phase of the staff exchange.

During the two-day visit, thirteen staff representatives at Warm Springs shared ideas and information in the areas of nursing, social services, recreation and rehabilitative programs. Each of these staff members spent time with the Center staff both on and off the unit to share information in their major field of expertise. Nursing services presented issues in care and treatment on the extended treatment unit, long term care units and acute care units. Also explored were specific components of the nursing inservice education program available to staff at Warm Springs/ Galen State Hospital.

The Center staff also had the opportunity to observe the rehabilitative therapy programs and the resident employment programs. This exchange will allow for a mutual exchange of information for staff of both facilities who have similar programs in the rehabilitation area, as well as Social Services.

Staff from Warm Springs will travel to the Center in the Spring to share ideas with the staff and observe the delivery of services at the Center. Additional nursing staff from the Center, as well as pharmacy staff, will again visit Warm Springs in the Spring. This staff exchange will explore the nursing care programs at the Galen Campus and the pharmacy services available on both campuses. Plans for this second visit will be underway shortly. It is expected that these staff exchanges will foster and maintain the working relationship between these two facilities, while developing a greater understanding of their unique roles in the mental health system.

Eastmont Human Services Center

Eastmont Human Services Center is pleased to announce two new staff members. Ms. Carole Johnson, Social Worker I, is replacing Jaci Wurm who decided to become a full-time mother. Carole began her employment on February 7, 1983 but worked at Eastmont from July 15, 1982 to December 14, 1982 as a Social Worker Intern.

Carole is single and resides in Glendive. She graduated from the University of Montana in December 1982 with a BA in Social Work. Carole is responsible for obtaining and gathering information from clients, families and others to identify problems and needs for social services. She also coordinates between departments for family visits, meetings concerning residents, and discharges and placements.

Mr. Perry Jones, Behavior Modification Therapist, is replacing Pete Hathaway who accepted a position at Eastern Montana Industries. Perry began his employment at Eastmont on January 5, 1983. Perry graduated from the University of Maine in 1976 with a BA in Psychology. Before coming to Eastmont, he obtained considerable experience as a behavior modification therapist at Boulder River School and Hospital.

Perry provides inservice training to the staff of Eastmont on techniques used in dealing with and training developmentally disabled persons. He also writes programs in all areas of training and collects and analyzes data generated from the program.

We wish the best of luck to Carole Johnson and Perry Jones in their new positions.

Warm Springs/Galen State Hospital

Dr. Richard Miller is leaving Warm Springs to set up his own dental practice in Deer Lodge. Dr. Miller has been employed at Warm Springs since July 1976. Warm Springs/Galen State Hospital is currently recruiting a dentist and Dr. Miller has agreed to remain on staff two days per week to service the dental needs of the patients until a replacement can be hired.

Joe Balkovatz, Acting Director Ancillary Services, recently underwent surgery for an aneurism on January 28, 1983 at St. James Community Hospital in Butte. Joe is recovering well and is expected to be released from the hospital February 15, 1983. Hurry back, Joe.

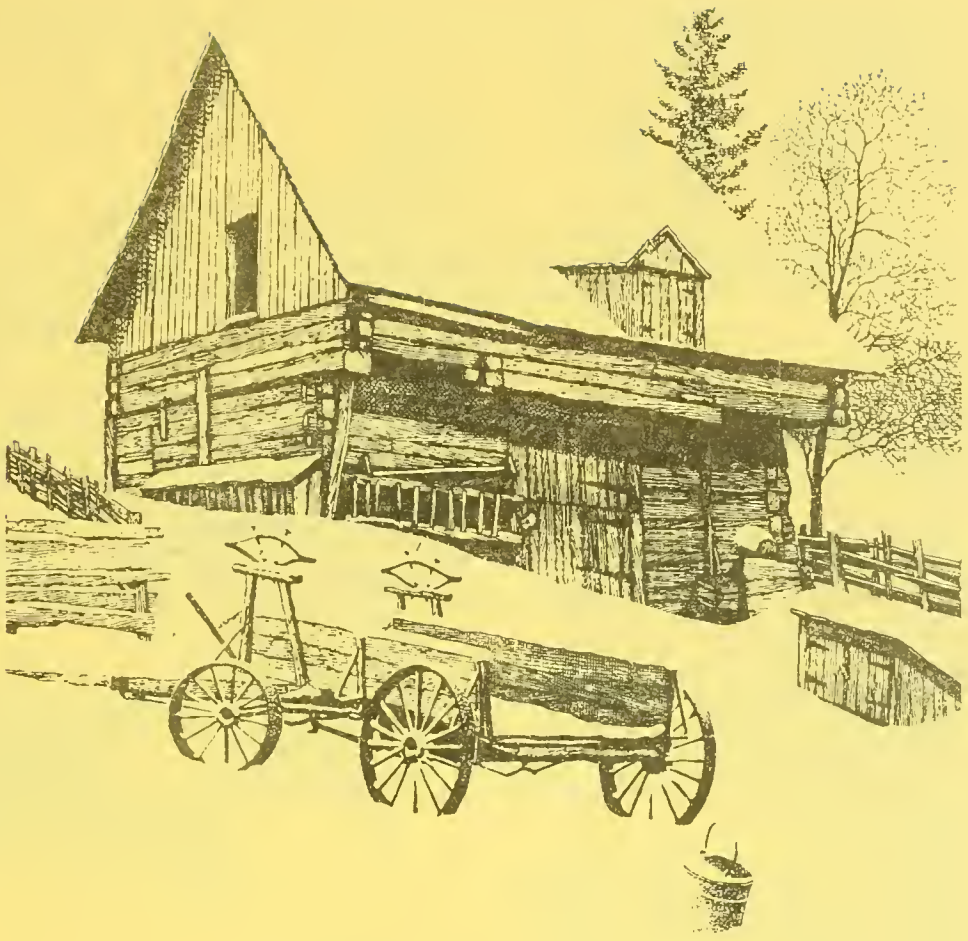
Gerald W. Bissonnette, M.D. joined the staff December 12, 1982. Dr. Bissonnette, a Board eligible Psychiatrist, has been assigned to the Extended Treatment Unit, located on the Warm Springs Campus. Dr. Bissonnette obtained his medical degree from the University of British Columbia in 1954. He then completed his internship at the Sacred Heart Hospital in Spokane, Washington and served his psychiatric residencies at the Providence Hospital in Seattle, Washington and Western State Hospital, Fort Stilacoom, Washington. Dr. Bissonnette was employed at Western State Hospital from 1957 until his retirement in June of 1982.

A stress series was offered on the Warm Springs Campus in February. A slide presentation, "Tour Preview", showing the organization and function of Warm Springs/Galen State Hospital, was presented on both Campuses. The inservice training and continuing education schedule for March is as follows:

March	2	Dental Care
	3	Ceramic Workshop
	4	Schizophrenic Video
	7- 8	Yearly Safety Class by Division of Workers Compensation
	9	Awareness Group
	14-18	Radiation Safety in Hospitals
	25	Sexuality Group

All hospital personnel are requested to attend the yearly safety class. Purpose of the class is to educate employees in accident prevention and awareness and to instill the idea that each employee has a safety responsibility to himself as well as to others.

COMMUNITY MENTAL HEALTH CENTERS



Eastern Montana Mental Health Center

The Miles City clinical office has been extremely busy the past few months, with a significant portion of time being spent in providing consultation and education services. Currently, the staff have been offering parenting classes through the Public Health Department and servicing a contract with a local nursing home.

The Child Protection Team, which serves Miles City and Custer County and surrounding areas, has become particularly active and is planning to facilitate the implementation of an educational program in the schools. The mental health center, in cooperation with the schools, SRS, Juvenile Probation, and the local hospital have solicited funds from the community and civic organizations to train individuals in implementing this important educational program.

A new outpatient therapist has been hired for the Glendive Office, in addition to the psychiatric nurse hired in December, to direct the partial care program. The Glendive partial care program is continuing to provide services to aftercare residents in the Circle Nursing Home. There are plans in the future to extend this mobile partial care to Wibaux.

The Glasgow staff is enjoying settling in to their new facilities. The pre-adolescent boys' group and a little girls' group ages (8-11) continue to be effective special programs delivered by the Glasgow staff. The staff is now developing new and additional components for their short-term partial care program which is aimed at the acutely mentally ill population.

John Maxness (1967-1983), Art Larson, (1977-1983) and Harold Fink (1976-1983) have recently retired from our Governing Board. Their advice and commitment over the years to the development of a better system have been invaluable. They will be sorely missed.

Northcentral Montana Community Mental Health Center

On February 1-2, 1983 the Region II Alternative Services hosted a group from Saskatchewan, Canada. The provincial health services director, ten professionals and four patients spent two days learning the methods of alternative services and working with the chronic patient.

The Second Annual Great Falls Invitational Tournament will be held March 24-25, 1983. The competition will include bowling, pool, ping pong and pinochle. Invitations have been sent statewide and a big turnout is anticipated. Last year seventy-four people attended from five cities.

Region II is in the process of establishing a co-op group home. There will be no cost to the center but they will assist in screening a number of patients to come up with four people who are compatible to live and work together. Clients will pay their own utilities, rent and food and the center will help them locate a house.

Remodeling plans are in process to increase the capacity of Passages, a residential care facility, from six residents to eight.

A very structured Tuesday afternoon activity has begun at the New Directions Therapy Groups in addition to structured skill classes in the area of job seeking skills, personal hygiene, money management, nutrition, exercise and communication skills. The Craft Unit made and sold table decorations for the State Bar Association Banquet and the Mental Health Association dinner.

A new psychologist, Thomas Marks, Ph.D. has been hired at the Conrad office to replace Dick Wimmers who left to accept a job at a mental health center in Albany, Oregon. Word has been received that he is really enjoying his new position. Dr. Marks will be arriving in Conrad on March 14, 1983.

Southwest Montana Mental Health Center

The partial care program in Livingston has been in operation for about three months under the direction of Shirley Wilbur. Shirley is new to mental health and is a mental health worker. The program operates three hours a day, three days a week and is being held, at present, in a church building. As the program grows they plan to find their own building. Region IV is now negotiating with the Diocese in Anaconda to start a partial care program there.

The Sexual Offender Treatment Program in Region IV has gotten underway. The Program has a few clients at the present time and they are receiving more referrals than they can handle.

Open house will be held at the Helena Satellite Office on February 25, 1983. Silver House Day Treatment Program in Butte plans to host an open house soon.

The 1983 Region VIII Conference will be held in Big Sky, September 7-10, 1983. Region IV staff will be coordinating the conference and would like to hear from anyone who has suggestions or ideas for topics or speakers. Please contact Jim Scott or Carol Zaharko at the Center.

(continued)

From The Field

Western Montana Mental Health Center

Two members of the Region V staff were recognized at the recent legislative banquet for their excellence in the provision of mental health services. Dianne Haddon, a clinical social worker, received her award for outstanding direct service provider and John Lynn, director of River House and Bridge House, was honored as outstanding administrative support person. Congratulations to you Diane and John. Missoula is proud to have you as members of their staff.

Region V has two new board members as a result of the fall elections. Mike Hutchin was elected to represent Lake County and replaces Bill Burley who had been a member of the board for 14 years. Henry Oldenburg, representing Flathead County, was elected to replace Joan Diest who had been a board member for 4 years.

Region V is pleased to announce the expansion of their Missoula-based River House Program, a psycho-social day treatment service. Additional space has been acquired which doubles the service area and two additional staff members have been added. This expansion allows for program modifications within various activities and also enables the staff to begin evening and weekend programs. This ability to offer additional options to the members is gratifying and support has been noteworthy.

Ethnic Minorities

The budget news for Indian Health Services in Billings looks good for the coming year. Predictions for 1984 do not look so promising.

Margene Tower and Gordon Neligh are currently involved in a project to set up a clinical computer program to aid non-psychiatric personnel in practice in the rural area to diagnose mentally ill clients, particularly children. The project is in the very preliminary phases awaiting approval from Washington.

KUDO KORNER

The Kudo Korner this issue honors the winners of the 1982 Montana Mental Health Awards.

Awards to three individuals and one program for outstanding service in mental health were announced at the Mental Health Association of Montana's Legislative Buffet January 20 in Helena.

Plaques were presented for outstanding service in 1982 to the outstanding direct service provider, board member, administrative support person and service program.

Diane V. Haddon, a clinical social worker with Western Montana Community Mental Health Center in Missoula was named outstanding Direct Service Provider. Haddon was cited for her "ability as a highly skilled and sensitive therapist and her gift for effectively representing her mental health center in a wide variety of consultation and education work in the community," according to Don Moore, Chairman of the Awards Committee.

John Nesbo of Shelby, was named outstanding Governing Board member for 1982. Nesbo serves on the governing board of the Northcentral Montana Community Mental Health Center headquartered in Great Falls. "John Nesbo has become one of the state's most effective advocates for mental health," Moore said in making the award. "He has lobbied extensively for mental health programs on both the state and national levels. His efforts have become so well known that he is often referred to in his part of the state as "the mental health commissioner."

The Sexual Abuse and Battered Spouse Services of South Central Montana Community Mental Health Center in Billings was named outstanding Mental Health Program of 1982. According to Moore, the center has been "a leader in Montana in developing services for these groups." Moore said that Sandi Burns, a psychologist and Darlene Joyce, a social worker have been the persons primarily responsible for this leadership.

The mental health awards are given annually by the Mental Health Association of Montana, the Montana Council of Community Mental Health Center Governing Boards, and the Montana Department of Institutions.

TRAINING

A conference on working with the chronically mentally ill in the rural setting will be held in Lewistown, Montana, April 11 and 12 (Monday and Tuesday) at the Yogo Inn. The conference is sponsored by the Montana Mental Health Manpower Program, the University of Montana School of Social Work and Montana Social and Rehabilitation Services. The title of the conference is "Chronically Mentally Ill — The Rural Challenge."

The keynote speaker will be Dr. Leonard Stein of the University of Wisconsin. He will also conduct two sectionals on schizophrenics with character disorders. The rest of the program will mainly be sectionals presented by Montana mental health personnel on topics that apply to the treatment of the seriously mentally ill in our rural areas.

Topics that will be presented are rural models of day treatment, forming self-help groups, aftercare, case management, family education, medication, burnout prevention, holistic methods, current legislation, crisis intervention and community resources.

The Region VIII CSP Conference titled "Learning and Sharing — Treatment and Support Systems for the Chronically Mentally Ill" will be held at the Salt Lake City Marriott Hotel, March 14-16, 1983. One of the primary objectives is to bring together family members, consumers, mental health clinicians, paraprofessionals, volunteers and other concemed people to share experiences and learn about treatment and support systems for the chronically mentally ill. The program will have a variety of sectional presentations and a keynote speaker.

DATE	PROGRAM	LOCATION	SPONSORS
Mar. 1	Time Management — Fee $45.00	Helena	Metamorphosis 549-5242
Mar. 4-6	Neuro-Linguistic Programming Will MacDonald—Fee $100	Butte— Copper King	Community Alcoholism Services of Butte Contact: Roland Byrd 723-8262
Mar. 7-11	Leadership & Management Training	Boston	University Associates — 1-800-854-2143
Mar. 7	Delegation Skills — Fee $55	Kalispell	Metamorphosis 549-5242
Mar. 14-15	Stress Management — Fee $110	Great Falls	Metamorphosis 549-5242
Mar. 14-16	CMI Learning Community Conference — No fee	Salt Lake City	Federal Region VIII — NIMH Contact: Bill Elliott 406-449-3964
Mar. 23-25	Human Resource Development Conference '83	San Francisco	University Associates 1-800-854-2143
Apr. 6	Effective Delegation Skills — Fee $55	Bozeman	Metamorphosis 549-5242
Apr. 11-12	Serving CMI in the Rural Setting	Lewistown	Manpower Program, Bill Elliott 406-449-3964
Apr. 18-20	National Conf. on Unemployment & Health Fee — $50	Dayton, Ohio	Human Resource Initiatives 1-800-654-2400
Apr. 18	Divorce Mediation/Custody Counseling Will Neville of Atlanta, GA	Missoula	Mental Health Staff Development Consortium Contact: Don Moore 449-3964
Apr. 19	Divorce Mediation/Custody Counseling Will Neville of Atlanta, GA	Helena	Mental Health Staff Development Consortium Contact: Don Moore 449-3964
Apr. 20	Divorce Mediation/Custody Counseling Will Neville of Atlanta, GA	Glasgow	Mental Health Staff Development Consortium Contact: Don Moore 449-3964
Apr. 21	Divorce Mediation/Custody Counseling Will Neville of Atlanta, GA	Great Falls	Mental Health Staff Development Consortium Contact: Don Moore 449-3964
May 2-4	Strategies for Parent Involvement — Fee $287	Louisville, KY	Parent Involvement Center 502-454-7555

VOLUNTEERS AT THE MONTANA VETERANS' HOME

The Montana Veterans' Home, which provides nursing and personal care for veterans and their spouses in Columbia Falls, relies heavily on their supportive program of volunteers. Different aspects of the Home receive a significant amount of support from organizations within the community of Columbia Falls and the Flathead Valley, in addition to veterans organizations throughout the state. The volunteer activity is coordinated by Bob Feenan, Program Manager at the Veterans' Home, and Betty Personett, Activities Aide to insure that programs suggested by such organizations as the American Legion Auxiliary, the V.F.W. Auxiliary, the local Elks or Eagles, are not a duplication of effort or scheduling.

The Veterans' Home is somewhat unique in its volunteer program because of the extensive support it receives from veterans organizations throughout the state. The State V.F.W. Auxiliary conducts monthly entertainment for the veterans at the Home. Most recently they held a very elaborate Valentine Party for all of the members, which included a local group of fiddlers from Flathead County, cookies, pie and ice cream. They also conduct bingo on occasion. The local American Legion Auxiliary conducts a bingo game each month at the Home. In addition to this, the service organizations contribute significantly to the annual Christmas Party which is held at the Home. These contributions take the form of money collected in local V.F.W. and American Legion Posts and D.A.V. Posts, to Christmas cards or gifts for each of the members. One of the V.F.W. Posts in Great Falls sent a dollar bill to each of the 115 members during this last Christmas Party.

The V.F.W. Post from Kalispell recently entered a float in the Whitefish Winter Carnival and recruited four or five members from the Home to ride on the float in their military uniforms. Most recently the Kalispell Elks purchased a three-wheel bicycle to be used by the members. The Polson Elks Club re-covered the pool table in the recreation room. The local Columbia Falls Kiwanis Club provides bingo at the Home every two weeks. In addition, the women's bowling league in Columbia Falls donated $100 from their activities to be used for the benefit of the members. Recently the Lions Club donated twenty-five free tickets to a breakfast in Columbia Falls for the members to attend.

The funds that are collected from the service organizations around the state are administered by the Memorial Foundation Board which is a group of local residents from the Flathead area who oversee the functions of the Foundation and insure that the funds received are used for the benefit of the members.

Another form of volunteer work which takes place within the Home itself is conducted by the women who are members of the Home. Currently, there are seven women in the Home. These women have a sewing club which is located in the Home itself and through their activities in the last five years they have generated over $5,000 which has been used for the Home. Recently they raffled a rug for $26 and a homemade quilt which brought $300. This money is used to buy items at the Home that the women feel should be purchased. Since the beginning of the club, more than $5,000 in equipment has been purchased for the Home including a refrigerator, stove, lights for the chapel and the sewing room, solarium shades, bingo machine, waffle iron for the kitchen and corn poppers. The club also helped to pay for a walkway for wheelchairs to the chapel and a washer and a dryer which is used by the members. This activity has been supported recently by a donation from the Scobey V.F.W. of a sewing machine to be used by the women at the Home.

This volunteer program receives significant support from the veterans organizations, civic organizations and from the members themselves. These volunteer services provide a more pleasant environment for the members and is a very important support function to the other functions within the Home.

400 copies of this public document were published at an estimated cost of $.40 per copy, for a total cost of $161.45, which includes $141.35 for printing and $20.10 for distribution.

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MONTANA
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DIVISION MENTAL HEALTH AND RESIDENTIAL SERVICES NEWS

VOLUME 2 JUNE, 1983 NUMBER 2

Capital Capsule

The Mental Health and Residential Services Division will lose two more employees on June 30, 1983 due to the loss of Federal Manpower Development funds. Don Moore, Director of the Program, has been with the Division since September 1978. He was hired as program manager and became director of the program in October 1981. Don is still uncertain as to what his future will be. Bill Elliott was hired as program manager of the program in June 1982. During his short period of employment, he has visited many of the programs around the state and has conducted several training seminars. Bill, also, has no definite plans for the future. Good luck to you both, Don and Bill!

Budget News

Fiscal years 1984 and 1985 are going to be leaner years for the Mental Health and Residential Services Division. Staff will be reduced from 8.5 FTE budgeted in FY 83 to 5.0 in FY 84 and FY 85 due to the discontinuation of the federally funded Manpower Project. The Division's budget has been reduced from $506,663 in FY 83 to $247,443 in FY 84.

Community mental health funding from the State General Fund and Federal Block Grant will be $5,095,195 in FY 84 and $5,232,403 in FY 85. In addition, Medicaid funds in the amount of $1,533,929 will be available for services to Medicaid-eligible clients in FY 84 and $1,588,230 in FY 85. Total funding from state and federal sources, as appropriated by the Legislature, amounts to an 8.7% increase over the biennium. This level of funding should maintain the current level of community mental health services through the coming biennium.

Assessment of Warm Springs State Hospital Patients

During the week of April 25-29, 1983 an evaluation of patients in four treatment units at Warm Springs State Hospital for potential placement in the community was conducted by clinical personnel from the five Montana community mental health centers and Warm Springs State Hospital. A total of 228 patients in the Geriatric, Intensive Treatment, Extended Treatment and Pre-Release Units were evaluated. The data are being reviewed and more information will be available at a later date.

SPECIAL OLYMPICS AT BOULDER RIVER SCHOOL AND HOSPITAL

Participation in the Special Olympics continues to be a high point of the year for many residents of Boulder River School and Hospital (BRS&H). In the past five years the Special Olympics program nationwide has undergone significant changes. The major emphasis of the Special Olympics today is a "total sports program" for developmentally disabled people. Under the "total sports program," developmentally disabled people are encouraged to participate not only in the traditional spring track and field events, but also throughout the year in such events as winter sports (emphasizing both downhill and cross-country skiing), basketball, floor hockey, bowling, swimming, gymnastics, and volleyball. In all these sports, participants are carefully grouped according to their ability, thus allowing for a great deal of success and positive reinforcement for a participant.

BRS&H has been actively involved in the Special Olympics since this program began in Montana 14 years ago. The emphasis of our involvement during this time has been track and field, tumbling, and bowling competition. This year, 85 ambulatory and nonambulatory residents participated in the Regional Special Olympics held in Anaconda on April 28 and 29. The State Special Olympics were held in Butte on May 18, 19, and 20, 1983. Twenty-one residents from BRS&H took part. There were over 1,700 athletes in the State Special Olympics this year, which easily makes it the largest athletic event held in Montana. Participation in the State Special Olympics gives the residents an opportunity to experience many exciting activities that would normally not be available to them. Among the most exciting may be the dance and banquet, and the opportunity to spend two nights in a motel.

During the past year, BRS&H residents have participated in both the Winter Special Olympics and Basketball Competition for the first time. Ten residents went to the Regional Winter Special Olympics held during January in Bozeman. They all competed in a one kilometer or three kilometer

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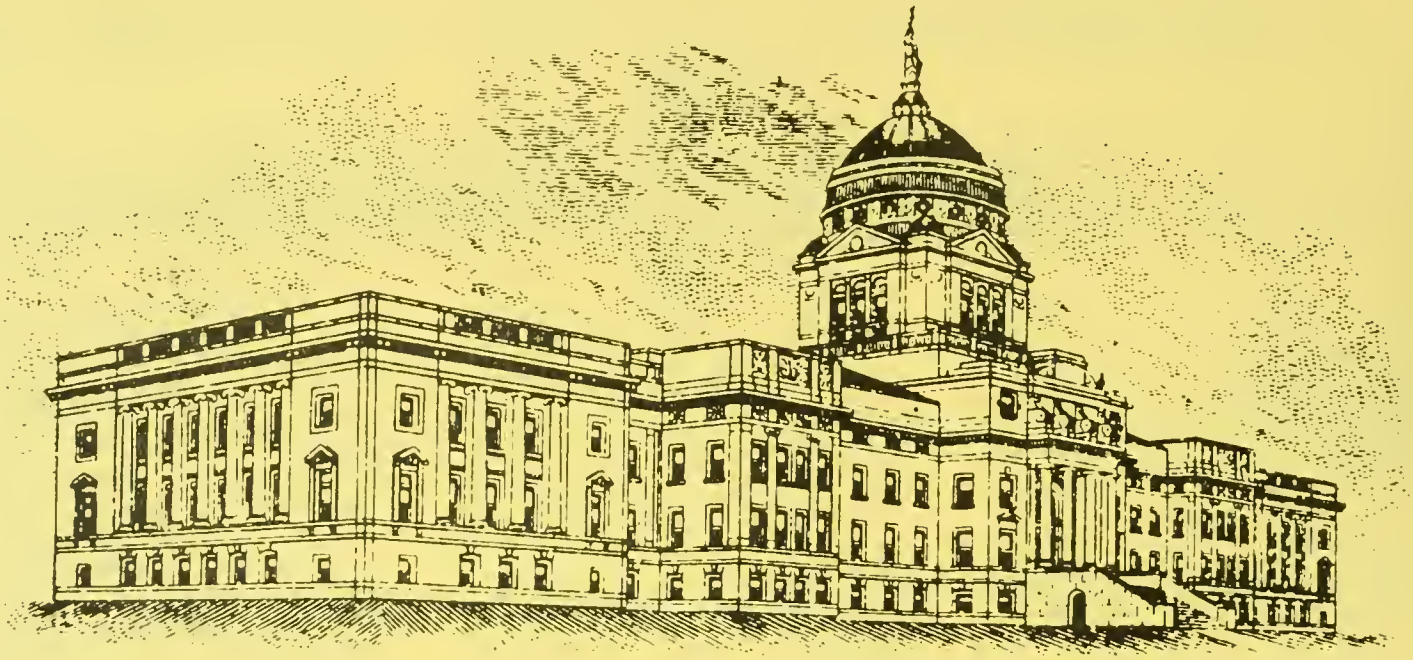


Legislative Update

Following is an update of the legislation of interest to the providers of mental health and developmental disability services:

SJR-3	Requesting the Department of Institutions to give the name "Bennett Hall" to the new wing at the Montana Veterans' Home	Approved
SB-107	To provide basic levels of benefits under disability insurance policies and contracts for the care and treatment of mental illness, alcoholism and drug addiction	Signed by Governor
SB-209	An act to provide criteria for admissions to the Center for the Aged	Signed by Governor
SB-214	Authorizing the Department of Institutions and Department of SRS to certify mental health professional persons	Signed by Governor
SB-248	To generally revise the laws relating to a claim of mental disease or defect in criminal proceedings	Signed by Governor
SB-267	Changing the name of the institutions at Warm Springs and Galen to Montana State Hospital	Signed by Governor
SB-324	To create a Montana Youth Treatment Center	Signed by Governor
SB-395	An act to give SRS and Department of Institutions authority to certify DD professional persons	Signed by Governor
HB-181	Changing the name of Eastmont Training School to Eastmont Human Services Center	Signed by Governor
HB-262	To conform the definition of DD for treatment purposes	Signed by Governor
HB-266	To change the eligibility criteria for admission to the Veterans' Home	Signed by Governor
HB-326	To remove the restriction on the amount of state funds that can be appropriated for regional mental health service contracts	Killed in Committee
HB-450	Abolish Department of Institutions and transfer functions of mental health and alcohol and drug to Department of Health	Killed
HB-604	Providing a list of rights for patients	Killed
HB-668	Increase lodging and meal reimbursement for state employees	Signed by Governor
HB-759	Appropriating money for an increase of 25 in the average daily population of Warm Springs State Hospital	Died in Committee

From The Field

COMMUNITY MENTAL HEALTH CENTERS

Golden Triangle Community Mental Health Center

The Northcentral Montana Community Mental Health Center has a new name. As of April 25, 1983, it will be known as the Golden Triangle Community Mental Health Center.

Bob Wolfe, ACSW, has resigned from the Youth and Family Services after having served eight years with the Mental Health Center. He has assumed responsibilities as the Social Service Director for Deaconess Hospital.

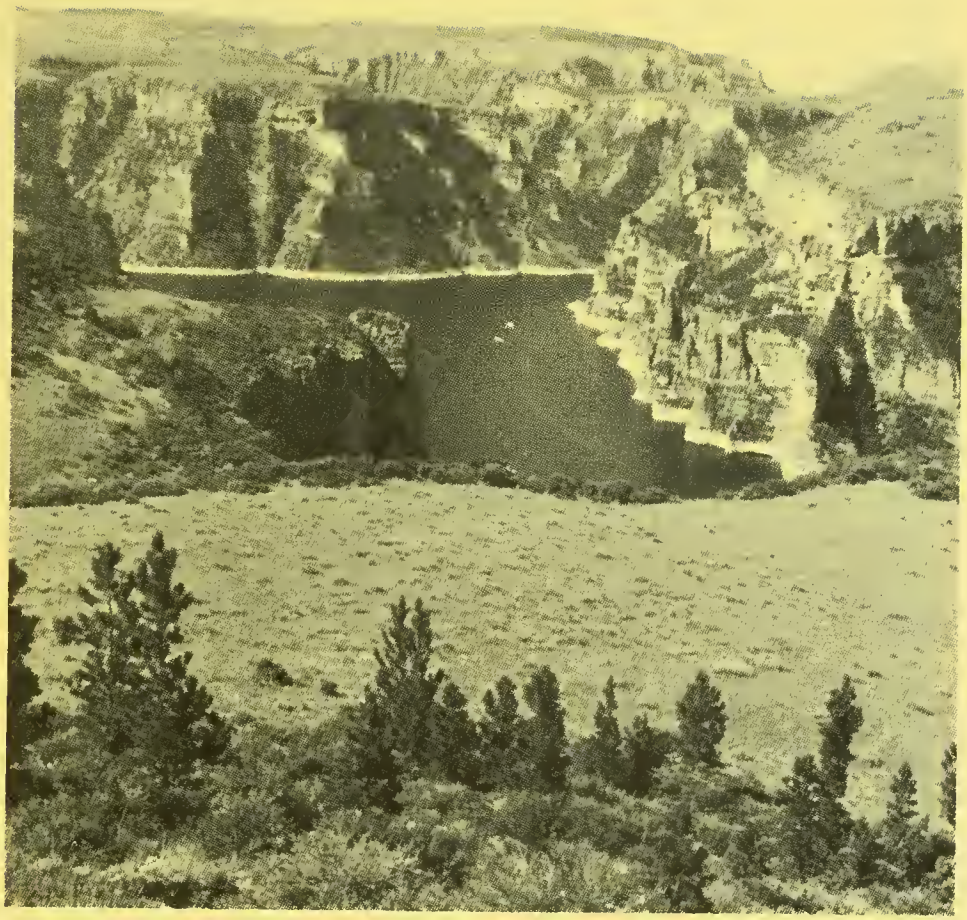
Ninety-seven participants from eleven cities attended the Second Annual Great Falls Invitational Tournament on March 24-25, 1983. This is the largest number of participants they have had attend such a program.

Ken Kleven gave a presentation on psychosocial rehabilitation at the Region VIII Learning Community Conference in Salt Lake City on March 14-16. Nancy Engen, Gayle Krsul and Deljean Wadsworth were also in attendance at the conference. Ken also gave three presentations on psychosocial programming and employment of the mentally ill at the Pacific Northwest Long Term Care Center sponsored by Northwest Regional Conference in Vancouver, Washington on April 27-29.

Alternative Services has hired three new staff as of May 2. Ramona Kramer has a Bachelor's in Social Work and received her psychiatric internship at Warm Springs State Hospital in the Forensic Unit. She came to the Center from the DD Activities Center in Choteau. Peggy Brown has a Bachelor's degree in Social Work and worked as a paralegal advocate for the Indian Educational Center in Great Falls. H. J. Ward came to the Center from the State of Vermont. He has a BA and is working as a mental health worker.

The new Directions Center has planned their annual vacation for June 1-4, 1983 at Salmon Lake.

Ken Kleven has replaced Philip Powers on the Board of Directors of the International Association of Psycho-Social Rehabilitation Services. Ken will be attending the board meeting and conference in Los Angeles, May 18-21, 1983. Ken's goal is to increase the membership of the organization and anyone interested in joining can contact Ken at P. O. Box 3048, Great Falls, MT 59403.



South Central Montana Mental Health Center

Bryce G. Hughett, M.D., Director of the South Central Montana Regional Mental Health Center is retiring and a party was held in his honor on May 3, 1983. About 165 participants attended the celebration. Bryce will continue to do some consultation and will stay active in mental health. He also plans to do some golfing and traveling. He has been with the mental health center for the last twelve years and prior to that was with the mental health clinic. We wish you well on your retirement.

William J. Wood, M.P.A. will replace Dr. Hughett as the new Director. Mr. Wood received his Masters in Public Administration from Kent State University in Ohio in 1977. He is currently working at Six County Community Mental Health Services in Zanesville, Ohio and will report to the Center in mid-June. He is married and has a 16-year old son.

Southwest Montana Mental Health Center

Montana House, the Day Treatment Program in Helena, has been chosen as this year's recipient of the proceeds from the Zeke's Oly Golf Tournament to be held in Helena in early June. Each year, Zeke's Distributing selects a local agency in need of funds that is serving the community in a human-interest capacity. Proceeds will be used to purchase a vehicle to transport members to and from program activities.

Planning for the Region VIII Conference is proceeding smoothly. A schedule of presentors has been prepared and a registration fee of $80.00 will be charged. Persons associated with mental health in the state are encouraged to attend. This will be an outstanding conference and will be held at Big Sky, Montana, September 7-10, 1983. If interested in attending, please contact Carol Zaharko or Jim Scott at the Center.

Western Montana Mental Health Center

The Western Montana Regional Community Mental Health Center, with the support and cooperation of the Lolly Pop Shoppe, is marketing "Lolly Flops." In the process of making Lolly Pops, there are those which do not meet the standards of the company. Lolly Pops are not placed on the retail market unless they are 100 percent cosmetically acceptable. The Center is marketing those which are less than perfect in shape and appearance with public and private non-profit organizations. Customers have included school clubs, little leagues, other mental health centers and thrift stores serving the handicapped. Lolly Flops are available in over 25 flavors. They come packaged 100 to a box, 600 to a case and the cost is 10¢ each in lots of 100. Mailing costs, in Montana, are approximately $5.50 per case and a resale price of 25¢ is suggested. If you are interested in the product as a fund raising effort, please call Linda Krieg at the Center in Missoula, 728-6870.

Lamplighter House, the day treatment program based at Kalispell, was officially dedicated at ribbon cutting ceremonies on May 4, 1983. The Center was honored to have Mayor LeRoy McDowell participate in the festivites. Many guests also attended the open house which was a part of the event and the members did a commendable job of guiding tours and preparing hors d'oeuvres.

INSTITUTIONS

Montana Center for the Aged

Staff and Skills Upgraded at the Center

As a result of a personnel hearing, nine employees at the Center are being upgraded from Psychiatric Aide I to Psychiatric Aide II. This will allow for a staffing ratio of one Psychiatric Aide II on each of the two nursing stations on a 24-hour basis, seven days per week. The Psychiatric Aides II were selected from the most senior Psychiatric Aides I at the Center and will begin their duties and new schedules on May 29, 1983. These new duties will be consistent with the upgrade from grade seven to grade eight. The following employees will become Psychiatric Aides II: Nileen McDonnell, Judy Schindler, Cindy Glidewell, Sharon Garcia, Dennis Messier, Norma Moritz, Lorraine Frounfelter, Orrie Kvick and one more to be selected.

All nursing staff will have an opportunity to upgrade their skills by attending a series of inservice classes starting on May 26, 1983. These classes will be presented by Mary E. Robinson, RN, Professor of Nursing at the Montana State University, Great Falls Campus. A total of four two-hour classes will be presented in the area of care plan development. It is planned that these classes will be videotaped so that all shifts will be able to benefit from the presentations.

In addition, Gerald Butcher, Superintendent has established a new Resident Care Plan Evaluation Committee. The chairperson is Anne Gagne, Nursing Services Director and includes two registered nurses, two psychiatric aides and a social worker. This committee will examine the assessment tools, scheduling, plan development and implementation and documentation required to fulfull regulatory standards.

Veteran's Home

During the last fiscal year, the Montana Veterans' Home has concentrated a significant amount of time and resources for development of the staff at the Veterans' Home. Pat Albright, R.N. has been assigned the responsibility to develop Staff Development Programs for in-service training. Some of the in-service training workshops that have been conducted during this fiscal year are: Patient Care Policies, Attends, Organic Brain Syndrome, The Patient with Aphasia/Dysphasia, Body Mechanics, Hand Washing and Catheter Irrigation, Depression, Coping with Staff Stress, Patient's Rights, Reality Orientation, Fire Prevention, Alcoholism, Transactional Analysis, Stroke Rehabilitation and Transfers, CPR, Heimlich Maneuver and several films.

In addition to the in-service training, the staff has attended workshops in the area which will increase their knowledge of health care for the elderly. Following are some of the workshops attended. Legal Aspects of Nursing, Communication Disorders Among the Elderly, Institutions and

Ethical Decision Making, Current Trends in the Management of the Cancer Patient, Montana Personnel Management Systems, Crisis Prevention Institute, Pharmacy Seminars, Reversible Confusion in the Elderly, Interactions in the World of the Elderly, Strategic Short Term Therapy and You, Too, Can Plan A Workshop.

Evelyn "Bunny" Personette retired after 18 years of employment at the Montana Veterans' Home. Bunny started her employment with the Home in the food service area and later worked in the custodial area until her retirement in April 1983.

Warm Springs/Galen State Hospital

The legislature passed a bill this session changing the name of the institutions of Warm Springs State Hospital and Galen State Hospital to Montana State Hospital. The change will take effect on October 1, 1983.

Warm Springs/Galen State Hospital is currently recruiting for physicians and/or psychiatrists.

Michael "Mickey" Butorovich retired from Warm Springs/Galen State Hospital on April 29, 1983 after 28 years of service. Mickey began his employment at Warm Springs State Hospital on May 1, 1955, as an Apprentice Plumber through a military training program. During the years of his employment Mickey held many positions of increasing responsibility. He served as the Maintenance Services Manager of Warm Springs prior to the consolidation of the Warm Springs and Galen State Hospitals in 1981 at which time he was appointed as the Environmental Services Director of the consolidated hospital. In addition, Mickey served as Fire Chief of Warm Springs. Mickey has been actively involved in the Western Fire Chiefs Association and is a past president of that organization. He currently holds the title of Exhibits Chairman of the organization and plans to remain an active participant. Over the years, Mickey has earned the respect and admiration of his fellow staff members at Warm Springs and Galen as well as staff of other institutions and the Central Office of the Department with whom he had contact. He will be sorely missed by those who were privileged to know and work with him. Tom McCarthy has been temporarily appointed to handle the duties formerly held by Mickey.

OTHER

Ethnic Minorities

Dr. Marie Brill from Los Angeles, California, will be visiting the Billings Area Indian Health Service in July to discuss cross cultural child rearing practices with Tribal people and to deliver a lecture to the area mental health staff. Dr. Brill studied under Dr. Freud in Vienna and was a close professional colleague and personal friend of Dr. Freud's daughter, Anna. Dr. Brill is the Senior Child Analyst and is internationally recognized.

Rural Workshop Over 120 mental health workers, social workers, volunteers, students and members of mental health support groups attended the two-day conference on working with the chronically mentally ill in the rural setting, which was held in Lewistown.

The speaker was Dr. Leonard Stein, who also presented sectionals on schizophrenics with character disorders. There were 20 sectional presentations given by Montana mental health and social work providers, most of whom are working directly with the CMI in rural areas. Subjects included in the presentations were family counseling, alternative day treatment practices, working with young adults, crisis intervention, community resources, case management, holistic methods, burnout prevention, psychotropic medication and coordination of aftercare. This was Montana's first conference on working specifically with the CMI in rural areas.

TRAINING Divorce Mediation Workshop

Will Neville, member of Georgia Mediation and Arbitration Service, conducted one-day workshops in Missoula, Helena, Glasgow and Great Falls. The first part of the workshop was a discussion of the philosophy of mediation. Dr. Neville believes the high cost of litigation is bringing about an upsurge in the use of mediation to settle disputes on private, industrial, governmental and international levels. The remainder of the workshop dealt with how to mediate the many details of a divorce in a way that helped the couple to part in an amicable manner. The workshops were sponsored by the Montana Mental Health Staff Development Consortium.

DATE	PROGRAM	LOCATION	SPONSORS
June 9-10	Recent Developments in Mental Health Law Fee $200	Chicago	American Society of Law & Medicine Victoria Coates (617) 262-4990
June 9-10	Psychotherapy and Schizophrenia Betram Karon, Ph.D. of Michigan State University	Missoula Univ. of MT	MH Staff Development Consortium Jim Parker — 728-6870
June 9-11	Creative Arts in Human Development Fee $45	Billings—EMC	EMC Extended Studies 657-2287
June 11	Madness & Technique in Psychotherapy Robert Langs, M.D.	San Francisco	Lenox Hill Hospital — (212) 794-4221
June 13-15	Cognitive Behavior Therapy Approach to Social Skills Training Dr. Kelly Egan, Univ. of Washington, Presentor Fee: Unknown at this time	Univ. of MT Missoula	MT Assn. of School Psychologists Eileen Morgan 442-6440 or 443-5315
June 16-18	Neuropsychological Assessment Dr. George Hynd, Univ. of Georgia, Presentor	Univ. of MT Missoula	MT Assn. of School Psychologists Eileen Morgan 442-6440 or 443-5315
June 23-25	Natl. Behavioral Pediatrics Conference	St. Paul, Minn.	Univ. of Minn./Continuing Medical Education 612-373-8012
July 24-26	Natl. Institute on Social Work in Rural Areas	Cheney, WA	School of Social Work—Eastern WA Univ. Cheney WA 99004
Aug. 14-19	Summer Institute on Drug Dependence	Colorado Springs	Institute for Integral Development 303-634-7943

(continued from page one)

cross-country ski race. In the month of March, 12 residents traveled to Great Falls where they took part in the State Special Olympics Basketball Tournament.

One resident has been selected as a member of the Montana Delegation to the International Special Olympics, which will be held in Baton Rouge, Louisiana, the week of July 11, 1983. There will be approximately 5,000 developmentally disabled participants in the International Special Olympics, representing all fifty states and many foreign countries.

The Special Olympics gives developmentally disabled people of all ages and abilities an opportunity to participate in competitive athletics, while keeping competition in perspective with participation and fun. Before the Special Olympics these opportunities were nonexistent for this population. The spirit of the Special Olympics can best be described by its pledge, "let me win, but if I cannot win let me be brave in the attempt."

KUDO KORNER

John Lynn, the winner of the 1982 Montana Mental Health Award for Outstanding Administrative Support Person was inadvertently omitted from the previous issue of Kudo Korner.

John wears several hats at the Western Montana Regional Community Mental Health Center. He is director of River House, a day treatment program, and Bridge House, a transitional living facility. He is also Regional Coordinator for Aftercare Services and liaison to Warm Springs/Galen State Hospital. He has administrative responsibilities for the operation of Lamplighter House, a Kalispell-based day treatment program, and Harbinger House, a transitional living facility in Kalispell. He is also a member of the regional staff management team.

When John entered employment with the Center there were only two operational aftercare programs in the Region. He quickly assessed the programs, noted many deficits and encouraged expansion and modification of services. Primarily through his efforts, the Board of Directors authorized a mid-year program modification involving a significant budget revision and increase. The Board's confidence in John's proposal was well justified as this action prompted the development of River House, a program which increased day treatment aftercare clients from 20 to 90 enrolled members. Based upon the New York City Fountain House model, where John trained for two weeks, the multi-service program of River House showed quick support from patients, parent groups, community agencies and fellow employees. Working with minimum staff, program efforts were very creative. It was necessary to solicit contributions to help underwrite program expenses and over $15,000 in goods and services were contributed through the efforts of John and his staff. Through his persistent efforts, the Bridge House transitional home was also developed in the Spring of 1982. The Missoula chapter of the National Association of Mentally ill, "A New Beginning," was also started through his influence and guidance.

John has established training sessions for aftercare staff and has acquired, through the University of Montana, placement of nursing and social work students who receive clinical training at River House.

John's approach of being open and direct has been a key to the success of the staff and the satisfaction and progress of the members. He is particularly able to challenge both staff and clients to perform at their highest level of functioning. John's interest in the chronically mentally ill is very timely during this period of strong support for services to those whose needs and emotional maladjustment are longstanding. His management, creativity and aggressiveness have been a key in the development of a comprehensive aftercare program in Region V.

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MONTANA
DEPARTMENT OF INSTITUTIONS

DIVISION MENTAL HEALTH AND RESIDENTIAL SERVICES NEWS

VOLUME 2 AUGUST, 1983 NUMBER 3

Capital Capsule

The Mental Health and Residential Services Division staff have been revising standards, developing a clinical privileges criteria and definition of services for community mental health centers. Upon request, members of the staff will be presenting this information to the satellite office staff beginning in August in Region V. This is a very important inservice, as lack of knowledge of any of this information could result in a loss of funds to the centers.

Business managers from the centers and staff from the Department of Institutions met on August 16 to review cost reports to determine fees for Fiscal Year 1984.

Professional Person Certification Committee

The Professional Person Certification Committee has two new members. Larry Noonan, from SRS, has been appointed to replace Janice Frisch, who has been a member since 1976. Peter Blouke has been appointed to replace Don Moore as a representative from the Department of Institutions. Dan Anderson is the chairman and Mike Muszkiewicz from SRS and David Briggs from Southwest Montana Mental Health Center complete the membership of the Committee. One of the Committee's immediate tasks will be to draft new administrative rules governing certification of professional persons in developmental disabilities and mental health

Mental Health Association

The Mental Health Association has agreed to formally advise and comment upon the future development of the state mental health system. Since the sunset of the Mental Health Advisory Council, the division has needed an organization with whom to discuss critical issues which affect the state mental health system; particularly, an organization whose composition consists of advocates, consumers and providers who are familiar with the state system. The division plans to meet with approximately fifteen Mental Health Association board members three times a year to review institutional program revisions, community-based residential alternatives, funding alternatives, prevention programs and inpatient program development. The first meeting will be October 6 in Bozeman.

From The Field

COMMUNITY MENTAL HEALTH CENTERS

Eastern Montana Mental Health Center

Region I is suffering through one of the hottest summers on record. Hot weather along with below average moisture is causing a difficult time for the people of Eastern Montana.

Dr. Paul Currey started work in Wolf Point on August 9 replacing Wayne Sullivan who resigned to return to Graduate School.

Don Range, MSW has been transferred from the Sidney office to the Glendive office.

Irene Pluhar has been hired as a day treatment aide in Miles City. The Day Treatment Program is busier than ever with the addition of an evening group during the summer months.

Clark Street Inn continues to be constantly at capacity (12 beds) with a waiting list. The addition of an evening treatment and activities program is keeping the residents involved and busy.

Hope continues for the speedy recovery of Pat Cranford of the Glendive office.

Golden Triangle Community Mental Health Center

Dick Hruska, Business Manager for Golden Triangle Community Mental Health Center was nominated the outstanding individual in the field of mental health for Montana by the Montana Council of Regional Mental Health Boards, Inc. Dick was nominated for his time and effort on legislative matters, specifically the bill providing for insurance for mental illness, alcoholism and drug abuse. A plaque will be awarded to the person selected at the 1983 Region VIII Conference to be held at Big Sky, Montana, September 7-10, 1983. Good luck to you, Dick.

New Directions Center has been busy as usual. Thirty members went on vacation to Salmon Lake. A good time was had by all and members caught their share of the fish. The Music Appreciation Skills Class, which began the first of July, has been invited to perform at Park Place Nursing Home and to conduct a singalong. The Yard Work Program is doing a fine job thanks to Jack Fairservice who puts in a lot of time for the success of the program. They work five afternoons per week doing four yards an afternoon. A

float trip is planned for the week of August 29 for a day and a half on the Missouri, Twenty-one members attended the State Fair. Seven members of the Ceramics Unit entered pieces in the Fair and won seventeen first, second and third place ribbons. As a precautionary measure. fire drills are held on a regular basis at the Center.

Considering the economic situation, the Thrift Shoppe is doing very well. Plants and baskets are the best sellers. They grossed $285 at Downtown Crazy Days on Saturday, July 30. An offset press was purchased in July for the Clerical Unit which now enables them to print almost all kinds of company forms and envelopes. They will also do printing for the Mental Health Center and for other agencies on contract.

Two professionals from Spokane Community Mental Health Center are scheduled to arrive in August to spend a day learning about the alternative services in Great Falls. Three professionals will also be coming from Saskatchewan in August. Congratulations to the staff on such an outstanding and widely recognized program. Alternative Services staff are continuing to visit Warm Springs monthly to follow patients admitted from Region II and to do discharge planning. The staff is working with Station KRTV to develop an updated video tape describing alternative services.

South Central Montana Mental Health Center

Donald Harr, M.D. became Medical Director of South Central Montana Mental Health Center effective 8-1-83. Dr. Harr will work three-fourths time at the Center and retain his salaried one-fourth time position with Billings Deaconess Hospital as Medical Director of the Psychiatric Unit. Don was Co-Director of the Mental Hygiene Clinic with Dr. Hughett for years and has since worked as a contract psychiatrist with the Center.

Southwest Montana Mental Health Center

Mike Stevenson and Alice Morse, Psychiatric Social Workers for the Southwest Montana Mental Health Center Helena office, have resigned. Mike has accepted a position at the Veterans' Administration, Fort Harrison and Alice is retiring after two and one half years at the Center. She had previously retired from Lewis & Clark County.

Some changes have taken place in the Southwest Montana Mental Health Center Governing Board. Frank Tikalsky, Beaverhead County representative, has resigned his appointment. To date a replacement has not been named. Linda Osmanson has replaced Bob Farren, Silver Bow County representative. Bob Storey, has resigned his appointment and Bill Dringle will be the Madison County representative.

Western Montana Mental Health Center

As the books are closed on another fiscal year, several areas reflect well on the performance of staff. One such area relates to fee collections. Even though all counties in the Region have been designated as high unemployment areas. fee income is up 22% over projection. This is attributable to at least three factors: (1) Staff have a positive attitude about the importance of fees in the therapeutic relationship as well as the funding of the Center and are responsible in dealing with their patients about the importance of fee payment. (2) Fee payment at time of service has been stressed. This has been a critical factor and will continue to be encouraged. This also brings some relief to the Billing Department by eliminating month end statements. (3) The Center has started using a fee collection agency. Although this has not generated much income to date, it has clearly demonstrated to the accounts that the Center means business. The staff has also had some useful in-service training around the issue of collections from the collection agency staff.

TRAINING

DATE	PROGRAM	LOCATION	SPONSORS
Sept. 1	Workshop Management Skills Fee $25.00	Sam Mitchell Bldg Rm 136, Helena	Jim Nys, Personnel Division Dept. of Administration 449-3871
Sept. 7-10	Montana Big Sky 1983 Conference	Big Sky, MT	Carol Zaharko or Jim Scott 442-0310 Southwest Montana Mental Health Center
Sept. 8	Conducting Effective Board/staff meetings Fee: $35.00	Sam Mitchell Bldg Rm 136, Helena	Jim Nys, Personnel Division Dept. of Administration 449-3871
Sept. 13	Interviewing—Foundation for Effective Hiring Fee: $25.00	Sam Mitchell Bldg Rm 136, Helena	Pam Wintrode, Personnel Division, Dept. of Admin. 449-3871
Sept. 15	Designing and Conducting Training Programs Fee: $35.00	Sam Mitchell Bldg	Judy Schill, Personnel Div., Dept. of Admin. 449-3871
Sept. 19	National Conference of Long-Term Care	Wash. D.C.	Sue Roderick (415) 655-6374
Sept. 20	Time Management for Supporting Staff Fee: $20.00	Sam Mitchell Bldg Rm 136, Helena	Linda Rickman, Personnel Div. Dept. of Admin. 449-3871
Sept. 21-22	Dynamics of Management Fee: $60.00	Sam Mitchell Bldg Rm 136, Helena	T. Gary Curtis, Admin., Job Service & Trn. Div. Dept. of Labor & Industry 449-4500
Sept. 27-29	Personnel Practices for Supervisors Fee: $90.00	Cogswell Bldg. Rm C-209, Helena	Jim Nys or Mark Cress, Personnel Div. Dept. of Administration 449-3871
Sept. 28-30	15th Annual Governor's Conference on Aging	Billings	Community Services Division—SRS

INSTITUTIONS

Montana Center for the Aged

A total of nineteen admissions were received at the Center for the fiscal year 1982-83. Of this total, thirteen were admitted from mental health centers throughout Montana and six residents were received from the Warm Springs/Galen State Hospital. These statistics are consistent with the continuous trend, which emerged about four years ago, of more admissions being received from the community at large than from the State Hospital. The Center has 199 licensed beds and the current census is 184.

Anne Gagne, Nursing Services Director, was recently elected chairperson of District 2 for the newly created Nursing Directors of Long Term Care Association. Anne attended the organizational meeting and will be assisting with the development of the charter and bylaws. Anne came to the Montana Center for the Aged from Michigan one year ago where she had been Nursing Care Coordinator at Saginaw Community Hospital. She received her nursing diploma from Mercy College in Detroit, Bachelors degree at Saginaw State University and Master of Art degree at the University of Detroit.

In an attempt to improve pharmacy inpatient services at the Center, a room has been selected and will be completely remodeled for the relocation of the pharmacy. The pharmacy was previously located in a small corner of the medication preparation room at the nursing station. This project was funded by the legislature two years ago and should be completed by the end of August 1983.

July is Central Montana Fair and Rodeo time in Lewistown. This year sixty-eight residents from the Center attended the parade, forty attended the local fair and thirty attended the rodeo. This is a participation rate of almost 38%. Limited transportation kept the attendance at the fair and rodeo low.

Eastmont Human Services Center

Thirteen residents from Boulder River School and Hospital were transferred to Eastmont on June 28. The transition was very efficient through the cooperation of the two agencies. Five Boulder River School and Hospital staff accompanied the residents to Eastmont and provided assistance and suggestions to a much appreciative Eastmont staff on the care of new residents. The residents have adapted very quickly to their new home and staff. Eastmont is now at full capacity with 55 residents.

After almost nine months as the Acting Superintendent at Eastmont, Sylvia Hammer has been appointed as Superintendent. Prior to this appointment, Sylvia was the Medical Services Supervisor for eight years. She is a registered nurse by profession having graduated from Lutheran Deaconess School of Nursing in Minneapolis, Minnesota.

The position of Habilitation Supervisor has recently been filled at Eastmont. David Goodell, originally from Kansas, is the new Habilitation Department Head. David's prior position included extensive experience in the developmental disabilities field. He received his Bachelor and Masters degree in Psychology from the University of Kansas. David and his wife, Cheryl, are expecting their first child this Fall.

Montana Veterans Home

Directors of Nursing representing twenty-eight long term care facilities in Montana held an organizational meeting in Missoula on June 2-3, 1983. The name chosen for the new organization was Montana Nursing Directors of Long Term Care. The purpose of this organization is to provide an opportunity for Directors to exchange ideas, develop inservice programs, improve communication with the public and provide quality care.

Carol Lubke of Missoula was elected president; Christa Myers of Deer Lodge, President-Elect; Nancy Goss of Ronan, Secretary and Ellis Stewart of Havre, Treasurer. The state was divided into eight districts and a chairperson elected in each

district who will represent the state organization and recruit membership among the long term care facilities in that district. State meetings will be held annually in district rotation. Each district will hold quarterly meetings, select a chairperson, a chairperson elect and a secretary-treasurer.

During the course of the two-day meeting, committees were appointed, district chairpersons elected and the time and location of the next annual meeting decided. Committee appointments will also be on a district rotation basis.

Jennie Ladenburg, R.N., Director of Nurses at the Montana Veterans Home was elected chairperson of District 8. Jennie is a graduate of Montana Deaconess Hospital in Great Falls, received a Bachelors Degree from Montana State University in Bozeman and has been director of Nurses at the Veterans Home since February 1974.

UNDERSTANDING THE MENTAL HEALTH NEEDS OF THE ELDERLY

(Excerpts from Paper developed for the "Conference on Aging", Tulane University Law School, Center for Legal Studies on Intergovernmental Relations, held May 17, 1983 in New Orleans, La.)

There were 25 million people age 65 and over in the United States in 1980, representing just over 11 percent of the population. By the year 2030, 64 million persons in the United States will be age 65 or over and they will constitute 20 percent of the population. Furthermore, the age 75 and over is increasing faster than any other portion of the elderly population.

Some of these advances in life span have come about due to improved public health practices. Along with prevention of diseases, there has also been the development of medical technology to prolong life.

Unlike popular myths, most of the elderly are not in nursing homes and other institutions. In fact, only 5 percent of the elderly reside in such facilities. The majority of the elderly live with families or friends or alone in our local communities. Although many elderly suffer from physical limitations which increase with age, the majority of them are still able to lead productive lives, if allowed.

The Current Mental Health System and the Elderly

To date, the mental health needs of the elderly have not been adequately addressed. There are three types of mental health problems that can occur as one ages:

(1) **acute mental health problems**, such as depression or anxiety

(2) **chronic mental health problems**, such as those experienced by persons who have lived most of their lives in mental institutions and which may become more difficult to manage in old age; and

(3) **decline in mental functioning**, a condition commonly called senility

For a long time, it was believed that almost all elderly persons suffered a decline in mental functioning and that it was an irreversible and inevitable process. As a result, families and mental health professionals often felt that treatment would not bring any significant changes. However, mental decline is **not** a normal aspect of aging, and much of what was thought to be senility has more often been found to be an acute mental health problem. Researchers have found that many elderly have been diagnosed as senile and left untreated when they were actually experiencing depression or anxiety, which are treatable.

This may help explain the fact that although the elderly are considered at high risk for mental disorders, very few of them are actually being treated by public or private sector mental health programs.

The 1977 National Nursing Home Survey estimated that of the 1.3 million total nursing home resident population recorded, approximately 226,000 (20%) had a primary diagnosis of mental illness. However, the National Institute of Mental Health estimated that approximately 750,000 nursing home residents (58%) suffer from chronic mental illness. Yet few nursing homes provide mental health services or employ staff trained in mental health.

The reasons for the lack of mental health treatment for the elderly are many and complex. The recent General Accounting Office report entitled, *The Elderly Remain in Need of Mental Health Services*, outlined the following reasons:

- **Knowledge of the special mental health characteristics of the elderly is still developing**, and many mental health providers do not have a good understanding of what specialized services they could make available to meet older persons' needs.
- **There seems to be some conscious or unconscious age discrimination in many mental health programs.** Since mental health services and resources are so scarce and in such demand, many administrators and providers believe it is better use of scarce resources to concentrate on the young and middle-age populations.
- Although mental health practices have changed from the emphasis on long-term hospitalization in isolated backwards of state mental hospitals, many of today's elderly still associate mental illness with fear and shame. Thus, the **elderly, themselves, are often reluctant to seek or accept mental health treatment.**
- Mental health providers must develop different strategies for reaching the elderly. Social service and health agencies provide services to the elderly and could be helpful in identifying those in need of mental health services. But, to date, **there has been a noticeable lack of coordination between mental health providers and social service and health agencies that serve the elderly.**
- Despite the fact that so many of the mentally ill elderly are to be found in nursing homes, **there are several characteristics of the long-term care system which reduces the availability and accessibility of mental health services.**
- **The lack of financial payment systems for mental health services often reduce the number of elderly being treated.**

Activities Being Undertaken To Improve Care

There are many activities being directed at improving mental health services to the elderly in local communities.

(1) **Prevention**

Communities that develop services which enable the elderly to maintain contact with others, often have happier and healthier senior citizens. For the most part, such prevention services can be developed by many different agencies, including community mental health centers. Programs that decrease an elderly person's isolation include volunteer work programs, foster grandparents and other childsitting programs, senior citizen centers and adult day care programs. Prevention also includes both public education and the promotion of mental health services for the elderly.

Many elderly and their families are unaware of existing resources and programs that could prevent unnecessary hospitalization or a decline in mental functioning. In addition, many community health providers and primary care physicians are not trained to recognize signs of psychological distress in their elderly clients. There is a need to educate those that deliver services to the elderly to identify the symptoms of mental distress and to assist in getting the necessary services.

(2) **Improvement in Community-Based Mental Health Services**

There is a need to identify and develop mental health services which are specially designed to address the needs of older patients. The elderly require many of the same mental health services as other age groups. In addition, there are more specialized services required, and these include:

- greater emphasis on case management
- development of better psychiatric assessment procedures
- counseling to families of the elderly
- new strategies and emphasis on outreach

(3) **Improvement in Institution-Based Mental Health Services**

A tremendous number of older people currently residing in nursing homes have significant mental and emotional problems that are going untreated. Some nursing homes now have contracts with community mental health centers or other mental health providers to train their staff or provide treatment directly to patients. Other communities are experimenting with the concept of "Psychiatric nursing homes: i.e., a nursing home specifically designed and staffed to meet the needs of those who are both physically and mentally impaired.

There are many activities being undertaken in states and local communities to address the mental health needs of the elderly and to improve their quality of life. The particular programs developed are guided by the circumstances affecting the elderly in the local area. The ideal mental health system for the elderly, however, should include a continuum of services based on the individual consumer's needs and should have a number of objectives which include:

- Rehabilitation
- Maintenance
- Prevention
- Protection—providing humane care for persons who are functionally mentally ill; assuring treatment from professionals who are cognizant of the aging process.

Regretfully, most communities do not have a well-developed or smoothly functioning system of providing mental health care for those senior citizens who need it. Mental illnesses, among the elderly, must be understood, treated and prevented, and the development of needed mental health resources is the first essential step in this process.

NEWSLETTER READER SURVEY

In order for us to continue to send you this newsletter, we must know it has value to you. If you wish to receive future copies, please complete the following questionnaire and return this card.

1. How do you find the articles?
   - ☐ Too Technical
   - ☐ About Right
   - ☐ Too General
   - ☐ _____

2. How many times should the newsletter be published each year?
   - ☐ Monthly
   - ☐ Semi-Annually
   - ☐ Bi-Monthly
   - ☐ _____
   - ☐ Quarterly

3. Are there any special subjects you would like to see presented? If so, briefly explain below.

4. Do you wish to receive future issues of the newsletter?
   - ☐ Yes
   - ☐ No

5. Do you know someone who would be interested in receiving the newsletter? Please provide that person's name and address below.

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COMMENTS:

KUDO KORNER

I can think of no other person who is more deserving of recognition than Bryce G. Hughett, M.D. Dr. Hughett became Regional Mental Health Director for South Central Montana Regional Mental Health Center in 1971 and retired in July 1983. His service dates back to 1952 when he worked with the Mental Hygiene Clinic prior to and after his service in the Army. After his retirement, Dr. Hughett was on contract with the Center for the month of July as the Medical Director.

Throughout his entire career, Dr. Hughett has consistently exemplified a leadership role as Regional Mental Health Director that has resulted in national recognition for the Center on several occasions. The number of people served in the eleven county region has quintupled under Dr. Hughett's leadership and the contacts with these clients have increased more than ten-fold. Many new programs provide community-based care for long-term patients. Six group homes and cooperatives provide transitional living for nearly 50 people daily.

Dr. Hughett has actively participated in many organizations including Governing Board Chairman of the Montana Health Systems Agency, Chairman of the Montana Statewide Health Coordinating Council and Psychiatric Consultant to the National Institute of Mental Health. In early 1977, as a result of his participation in an American Psychiatric Association Meeting where the first mention of "Community Support Program" grant monies occurred, Dr. Hughett prompted the application of a grant from his Center which extended for five years and provided several hundreds of thousands of dollars for programs in Montana. Program growth within Region III, as a result of CSP funding and Dr. Hughett's recognition on the national level through the American Psychiatric Association, led to the 1980 WNET national documentary on deinstitutionalization entitled "Back Wards to Back Streets." South Central Montana Regional Mental Health Center was featured as "one of the exceptional programs that works."

Through Dr. Hughett's urging, the Center participated in the pilot field testing and was accredited in 1977 by the Joint Commission of Accreditation of Hospital's Community Mental Health Division. In 1981 South Central was the only Center in Montana, one of only two in Region VIII and one of only 55 out of 650 Centers in the nation to be accredited by JCAH.

Dr. Hughett was given special recognition and presented an award by the Mental Health Association, Department of Institutions and State Council of Community Mental Health Center Boards, Inc. at his retirement party. This expression of appreciation is shared by countless people around the state and we wish Dr. Hughett much joy and happiness on his retirement.

350 copies of this public document were published at an estimated cost of 46¢ per copy, for a total cost of $160.74, which includes $128.04 for printing and $32.70 for distribution.

DEPARTMENT OF INSTITUTIONS
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MONTANA
DEPARTMENT OF INSTITUTIONS

DIVISION MENTAL HEALTH AND RESIDENTIAL SERVICES NEWS

VOLUME 2 OCTOBER, 1983 NUMBER 4

Capital Capsule

House Bill 909 (Chapter 687, Laws of Montana, 1983) was passed by the 48th Legislature. This bill directs the Governor or his designee to conduct a study of and propose a long-range plan for the delivery of services to persons with developmental disabilities. The purpose of the study is to solicit comments from the general public and especially from residents of communities where developmental disability services are provided by the state. The study is to include an analysis of institutional services, community-based services costs, the impact of closure of Boulder River School and Hospital on the community, development of a history and a projection of funding for services for developmentally disabled persons and to develop a proposed long-range plan for the state's role in serving developmentally disabled persons. Theodore H. Clack, Jr. has been contracted by the Governor's Office to provide assistance and support to the HB-909 Advisory Council in conducting this study.

Members of the HB-909 Advisory Council, appointed by the Governor for a two-year term, are: William Mathers, Miles City; Richard Swenson, Ph.D., Helena; Senator Ed Smith, Dagmar; David Kirsch, Boulder; Verle Rademacher, White Sulphur Springs; Sister Michel Pantenburg, Billings; Representative Glenn A. Roush, Cut Bank; Barbara Sutherlin, Boulder; William Sirak, Great Falls; Gary Marbut, Missoula and William Crivello, Kalispell.

Recommendations of the Council should be made to the Governor no later than September 14, 1984.

City of Jackson Grants Funds

The City of Jackson, Mississippi recently granted $80,000 to be used to purchase and renovate a facility to serve as a model personal care home. The grant will go to the Mental Health Association in Hinds County who will work with the Jackson Boarding Home Consortium in searching for and preparing a house to be used by ten to twelve residents.

The funds for the facility are from Jackson's Community Development Block Grant Program and this is an innovative use of the program. The home, when completed, will meet all local and state regulations, especially those of the Mississippi State Health Care Commission. Efforts will also be made to see that the home complies with the United States Department of Housing and Urban Development (HUD) standards so that residents can be eligible for rent subsidies.

Plans are being developed to provide supportive services such as transportation, mental health and medical care, for the residents. Many agencies will be involved in making the program work.

Governing Boards

This is the first in a series of articles for board members taken from *Basic Training Manual for Board Development* by Development Associates, Inc. Future articles will include information on roles, rights and responsibilities of a board member, composition of a board, preparation and use of an agenda, and techniques for solving problems at board meetings.

The governing board is the principal policymaking unit of an agency. It should not be confused with other organizations which may have been delegated major policymaking authority; such as area or neighborhood boards, headstart, legal services or policy advisory groups. It is the responsibility of the board of directors to clearly define the relationships with the subordinate group in the event policymaking authority is delegated to them.

The governing board is autonomous, bound only by its legal responsibilities under the charter and bylaws and its contractual obligations to governmental agencies and other funding sources. Implied, however, is an obligation to the community to accomplish the objectives of the agency as stated in its proposal. To fulfill this obligation and accomplish its goals most effectively, the board should adhere to two basic concepts:

- It is primarily a policymaking body. The director of an agency and his staff are charged with implementing and executing policy. This means that while the board must observe, question, and evaluate the operational functions of the agency, it should refrain from direct participation in those functions as much as possible.
- The authority of the board results from its group action. No individual board member has any authority over the agency.

Policy advisory groups, a formal means for involving consumers in decisions about the program, will vary depending on

the kinds of agencies involved. Policy advisory groups should perform meaningful functions in the management of the program. They are expected to:

- Assist in the development of the application and give approval to the application prior to submission
- Participate in the selection of the program director
- Assist in establishing criteria for the selection of staff personnel
- Initiate suggestions and ideas for program improvements
- Serve as a channel for hearing complaints on the program
- Assist in organizing activities for consumers
- Assume some degree of responsibility for communicating with consumers and encouraging their participation in the program
- Serve as a link to public and private organizations
- Represent the professional organizations, public agencies and consumers involved in the program
- Aid in recruiting volunteers and assist in mobilizing community resources

Meetings must be frequent and there should be a prepared agenda. No specific limits are set as to the length of time which members may serve in an advisory group. Frequent rotation of membership is important to assure adequate representation of consumers.

It may not be easy for directors and staff to give up power when decisions must be made. Even when they are committed to involving consumers, the staff must take care to avoid dominating meetings by force of their greater training and experience in the process of decision-making. Professionals may be tempted to do most of the talking. They must learn to ask consumers for their ideas, and to listen with attention, patience and understanding. Self-confidence and self-respect are powerful motivating forces. Activities which bring out these qualities in consumers can prove invaluable in improving the services to the community.

The Boulder Training Model: An Assessment of its Maintenance

By: Timothy Plaska, James Burgess and Mary Tillema

Editor's Note: This article is a condensed version of a paper presented at the Fifth Annual Convention of the Association for Behavior Analysis, Dearborn, Michigan, June 1979. Complete copies of the paper are available from Timothy Plaska, Boulder River School and Hospital, Boulder, Montana, 59632.

Introduction

Recently within the United States, the care, training, and habilitation of the institutionalized retarded has become a major social issue. Concerns with the right to treatment, the movement to convert institutions to training facilities, and the emphasis on the developmental model and the normalization principle have resulted in many institutions pursuing staff training models to facilitate the conversion from custodial-oriented facilities to training facilities.

The importance of adequate staff training has been emphasized, and the increasing demand for behavioral programs within institutional settings likewise has increased the need for training non-professional staff to be behavioral engineers. Direct care staff often number as much as 50% of an institution's employee population and since they are in constant direct contact with the residents, they constitute an invaluable resource as behavior-change agents.

Generally, many administrators within institutions have assumed that in-service training for direct-care staff leads to improved staff performance and, finally, to more effective service programs. Investigators who have attempted to evaluate the effects of in-service training on subsequent staff performance have demonstrated that in-service training can increase verbal knowledge and training skills, but studies in which staff or resident behavior was repeatedly monitored have suggested that in many cases, instructions, in-service training and the development of job assignments can be expected to have relatively small, temporary, or negligible effects on the staff's actual work performance.

Unfortunately, the available research does not bear out the optimistic assumptions made by many about the value of in-service training. Consequently, existing staff training models are being scrutinized with the realization that traditional institutional pre-service and in-service training models sometimes serve little purpose but to perpetuate the maintenance of inadequate existing systems.

Development of the Model

In 1975, Boulder River School and Hospital was attempting to comply with recent federal and state "right to treatment" laws which mandated that the facility provide habilitative treatment to all institutionalized residents. In order to comply with the laws, it became obvious that the institution would either have to hire a large contingent of professional therapists and training specialists or develop a staff development program to train direct-care workers to become competent, paraprofessional treatment agents. The latter solution was chosen, and in January 1976 the staff of Boulder River School and Hospital began to replicate the Teaching Research Model, developed by the Teaching Research Infant and Child Center in Monmouth, Oregon. During the first year of operation the original Teaching Research Model underwent many changes and evolved into the Boulder Training Model (BTM). The demonstration classroom, a major component of the model, was also modified and became known as the Boulder Training Center (BTC). In essence, the Boulder Training Model became a complete system of establishing, delivering, monitoring, and maintaining habilitative training and behavior management programs within the institution.

Components of the Model

In the Boulder Training Center, staff are instructed in resident training techniques and in the overall system of data collection and analysis. Direct-care, management, and support staff are trained in a one-week, 35-hour course. The course consists of approximately four hours per day of practical, or "hands on," training, in which trainees learn to run 1:1 skill acquisition programs, conduct activity areas (group programs), conduct table manners training, and interact appropriately with the seven residents who are BTC students. Trainees spend another three hours per day in an academic classroom setting, where they are introduced to the basic principles of behavior modification, behavior measurement techniques, analysis of data, called "updating," and behavior intervention techniques. In a typical week, a group of trainees consists of six to eight employees. Thus, the ratio of instructors to trainees is one to two, which allows the trainees to be monitored continually through the intense "hands on" activities.

The seven residents who participate in training programs in the BTC are selected from several cottages within the institution. These residents exhibit a wide range of skills and behavior problems, and they provide the trainees with both familiar and unfamiliar behavioral repertoires.

During the training week, the trainees have no responsibilities other than attending the BTC. The trainees' performance is geared toward meeting twelve specific, criterion-based training objectives that are directly related to their cottage training responsibilities.

(continued on page five)

From The Field

INSTITUTIONS

Center for the Aged—Task Force on Resident Services Created

At the request of the Superintendent, Gerald Butcher, a Task Force has been developed to examine the services offered to residents at the Center. This Task Force will explore ways to improve these services and further define the role of the Center in the total health care system in Montana.

Almost since its inception in 1950, and subsequent opening in 1952, the role of the Center has been unclear to many professionals within the therapeutic community. For example, is the Center a nursing home for geropsychiatric residents, or is it a psychiatric treatment facility for geriatric residents?

The Task Force will explore this issue and make specific recommendations to the Superintendent as to what services should be provided and how they can best be provided within the scope of legislative mandates. The expectations of the Center by various groups such as the Board of Visitors, Mental Health System, Department of Health and Environmental Sciences and the State Legislature will also be examined. Members of the committee are: Douglas Barnes, Chairperson, Don Ackerman, David Clark, Kay Brooks, R.N., Ann Gagne, R.N. and Sharon Garcia, from the Center for the Aged and Dan Anderson from the Department of Institutions.

The Task Force, which has been given top priority by the Superintendent, will complete its study by March 28, 1984. Committee recommendations will be presented in staffing, admissions, levels of care, range and scope of services to residents, licensure of the facility, budget, and if needed, proposed legislation.

Eastmont Human Services Center—On the Road to Independence

For many people the summer months are the most hectic, and, speaking for three former residents of Eastmont, I can say that August was no exception.

Bright and early on the morning of August 30, three of Eastmont's residents and three staff members journeyed to Helena. With anticipation, the crew set out. This was not going to be an ordinary trip. The residents were getting placed in a group home. The trip to Helena was a long, hot one and not totally uneventful—but the troops survived.

Once in Helena, the residents were taken to their new home, the Montana House. This new home will be called "their home." They will live there. They will have neighbors and a yard What's more, these folks will be going to work each day, just like almost everyone else does. They have been given a chance at leading the most normal life possible. This is a "golden opportunity" to say the least, because they have not been able to experience a real home life or work environment. They have spent the majority of their lives in various institutions; but for these three residents that were moved from Eastmont to the Montana House, they will come one step closer to living an independent life. Most people who work with the developmentally disabled population will agree that any degree of independence achieved is one step closer to a "normal" life.

These three people are not the only residents from Eastmont who have been given a chance at that independence. They are only an example. During the summer, two children from Eastmont were also placed in group homes, and they will be a part of the public school system.

Institutions are places where needs are met and people care, but **nothing** can compare to "HOME SWEET HOME."

Montana State Hospital (Formerly Warm Springs/Galen State Hospital)

Just a reminder that the last Legislature approved a change in name for Warm Springs/Galen State Hospital. Effective October 1, 1983, the new legal name for the consolidated institution will be Montana State Hospital.

Evan Dudley is retiring on October 20, 1983, after having served over 26 years in the Food Service Department. He is a very valued employee and will be missed. A retirement party was held on September 30.

The position of Psychiatric Social Worker I was filled on September 6, 1983 by Jeff Sturm. Jeff received his Masters degree from the University of Wisconsin on May 22, 1983. He had previously been employed as a Social Worker II on the Extended Treatment Unit from March 31, 1980 until January 11, 1982, when he left to continue his education.

Resignations from Montana State Hospital during September include:

Dr. George Moffitt—Physician
Fred Hafner—Psychiatric Social Worker III
Cheryl Allum—Social Worker III
Harry Dziak—Social Worker II
Cheri Sutherland—Business Teacher
Randy Hansen—Special Education Teacher
Jonette Zulauf—Psychologist I
Sofia Steffan—Licensed Practical Nurse III
Francine Galle—Licensed Practical Nurse II
Ruby Olson, Nurse Aide
Catherine Dixon—Food Service Worker

They are recruiting for a Psychiatric Social Worker II at the present time.

Montana Veterans' Home

50-Bed Addition to the Montana Veterans' Home

Work is continuing on the construction of the 50-bed addition at the Montana Veterans' Home, which was approved by the 47th Legislature in 1982. The Legislature appropriated a total of $1,918,300 for the construction of the 50-bed addition, remodeling of the existing kitchen and a sprinkler system for the Domiciliary. The 50-bed addition will address the pressing nursing home need for veterans throughout the State. The bids were let the 1st of October, 1982. Stewart Construction of Kalispell is the General Contractor. Hamilton Industries of Whitefish is the Mechanical Contractor and Powell Electric of Kalispell is the Electrical Contractor.

Ground breaking ceremonies were held at the Home on Saturday October 9, 1982 with Governor Schwinden performing the official ground breaking. Also in attendance were Representative John Melcher, Representative Pat Williams, Representative Lee Metcalf and other Senators and Representatives of the State Legislature from the northwestern part of the State.

Construction began in mid October, 1982. The foundations were completed by December, but construction was halted during the winter. In June of this year construction was begun again and it is preceding as scheduled, with a completion date of February, 1984.

In June and July of this year the food service was moved from the current kitchen area to an older kitchen area which was used on a temporary basis. The existing kitchen has been totally remodeled and has been in use since the middle of August.

When completed the Veterans' Home will have a capacity of 66 Nursing Home beds and 85 Domiciliary beds. In addition 24 of the domiciliary beds meet Nursing Home standards and as the need for Nursing Home beds increases those 24 beds will also be used for Nursing Home beds. Fourteen additional employees were authorized to provide services to the additional members at the Home.

The Men's Dorm which currently houses 14 members will be closed in February. These members will be moved to the new addition.

In addition to construction of the 50-bed addition, a contract has been awarded to replace the sidewalk to the main gate of the Veterans' Home. Also, a contract has been awarded to Paccom to replace the existing phone system on the campus.

The needs of Veterans in the State of Montana for additional Nursing Home beds are becoming more obvious as WWII veterans require nursing care. During the 1980's the need for additional Nursing Beds for veterans will become critical. Currently there are 35 veterans on the waiting list for nursing beds.

COMMUNITY MENTAL HEALTH CENTERS

Eastern Montana Mental Health Center

Eastern Montana Mental Health Center has scheduled their regional staff meeting for October 5-7 in Glendive. The Mental Health and Residential Services Division staff will give a presentation on the new standards and interpretations. Peer review, administrative discussion and a video tape, "The Bubbylonian Encounter" by the Custer County Child Protection Team is also planned. Friday morning will be devoted to a presentation by Sherman Severson, M.D. on psychotropic medication.

The Center staff has been busy preparing for the contract negotiation meeting with the Department of Institution personnel on October 4.

Golden Triangle Mental Health Center

John Nesbo, Governing Board member for Region II received the award for outstanding individual in the field of mental health in the Rocky Mountain Region. Dick Hruska, Business Manager, was the recipient of the award for outstanding individual in mental health for Montana. The awards were presented by the Rocky Mountain Region of the National Council of Regional Mental Health Boards, Inc. at their conference held at Big Sky, Montana.

Region II has received a grant from the Burlington Northern Foundation for $1,000 to help defray the cost of a van for use in the Havre Satellite Office. They also have a contract with the Deparment of Institutions to provide services to the unemployed in Blaine, Cascade, and Glacier Counties.

New Psychologists in Region II include Paul Furlong, Teton County; Theo Riley, Liberty County; Bill Allison, Blaine County; and Bill Trueblood, Hill County. Nina Ballatore has been hired as a mental health worker in Great Falls. New secretaries are Janice Hakenson for Hill County and Sandy Benson for Cascade County.

Golden Triangle Mental Health Center will begin another year of MSU Student Nursing Program in October. They will be serving both Juniors and Seniors this year, a change from previous years when only Seniors were trained.

South Central Montana Regional Mental Health Center

South Central Montana Regional Mental Health Center enrolled its 30,000th patient on August 31st. When you consider that the population for Region III is about 150,000, the Center has served approximately one-fifth of the total population or one out of every five people in the region. Congratulations to the staff at the Center.

The Beartooth Expedition was the first joint effort between the Center and the Juvenile Probation Office (Yellowstone, Carbon and Stillwater Counties) to conduct a 10-day outdoor therapy program for juvenile offenders. Larry Fritz, from the Columbus Satellite Office, was instrumental in writing the grant and coordinating the effort which was funded by the Montana Board of Crime Control. Nine youths, ages 14-17, were involved in the backpacking, hiking and climbing experience from August 18-27. Guides Larry Fritz, Annette Bacheller from the Yellowstone Crisis Intervention Unit and Pete Shelley, Wilderness Instructor are to be congratulated for an exhausting job well done. The mental health component of the experience is for the purpose of attempting to redirect campers' lives.

Region III has planned a three-day retreat on October 5-7 near Red Lodge for the purpose of team building and problem solving of internal issues of the Center. Seventy-three staff persons are planning to attend and are looking forward to the experience.

The Harlowton Satellite Office moved to a new location on September 26. The office is located on the lower floor of the newly constructed Bair Medical Clinic.

Jackie Beaty has been employed as the Chemical Dependency Counselor at the Columbus Satellite office since September 21.

Southwest Montana Mental Health Center

The Mental Health Center is to be commended for the success of the Region VIII Conference which they hosted at Big Sky. They have received a lot of positive feedback for the presentations and high quality of the conference. Thanks go to Carol Zaharko and Jim Scott and all of the staff at Region IV for your hard work.

Powell County is now a participating county in Region IV. All of the counties, except one, are now participating in the mental health program.

Unfortunately, the Center's request for a variance from the City Commission to expand and renovate the transitional living facility in Helena was not granted.

Region IV has signed a contract to provide consultation services to the Headstart Program in Anaconda.

William Swanson has been selected as the new board member from Beaverhead County to replace Frank Tikalsky. Earl Knight is the Powell County representative to the Governing Board and Bill Dringle will represent Madison County.

The Quality Assurance Committee has developed a plan for quality assurance for the purpose of internal management of the Center.

Western Montana Mental Health Center

In recognition of the fact that too few roses are given to employees who labor in behalf of those needing mental health services, Region V honored clinical and clerical staff who distinguished themselves during the 1982-83 fiscal year by their outstanding performance. Clinical staff selected were: Hank Winters, Hamilton; Dr. Marianne Spitzform, Missoula; Dianne Haddon, Missoula; Peter Volkmann, Thompson Falls, and Dr. Gordon Gerrish, Ronan.

Those receiving awards in the Aftercare Clinical category were: Todd Neel, Missoula; Kerry Salisbury, Kalispell; Bob Rummel, Missoula, and Diedrich Meinkein, Missoula. Clerical staff honored were: Shirley Bartlett, Missoula; Phyllis Joseph, Missoula; Anne Frey, Hamilton; Hazel Day, Libby and Marie Richardson, Kalispell. Also recognized were Dr. Jay Palmatier, Regional Clinical Director and Margaret Crowley, Business Service Officer, for outstanding administrative support.

The Center is proud of these individuals and will continue to formally recognize excellence each year.

OTHER

Indian Health Service

The IHS/State contract for involuntary commitment services is still held in abeyance due to the conflict of the Health Resources and Services Administration (HRSA) contract regulations and the State's absolute preference for veterans and handicapped.

A symposium was conducted in August to compare the psychoanalytic model of child development with traditional Indian child rearing practices. Dr. Marie Brill was the guest lecturer. Other guest lecturers were tribal experts in the history of child rearing practices and traditional Indian values and beliefs. The meeting was attended by IHS staff and other local mental health professionals. There were many areas of common agreement between the psychoanalytical model and traditional child rearing practices.

Indian Health Service has a vacancy for a mental health specialist on the Wind River Reservation (which is beautiful) in Wyoming. They are recruiting for a clinical psychologist, master psychiatric nurse or psychiatric social worker.

(continued from page two)

Assessment tools used during the training week vary from one objective to the next. For practical training objectives, of which there are seven, evaluation checklist forms have been developed to objectively rate specific training behaviors, such as the delivery of cues, consequences, the recording of data, and so on. Performance on the five academic objectives is measured with a variety of written exercises. For instance, updating, one of the academic skills taught, consists of trainers analyzing program data and deciding how to advance a student through or make changes to the task analysis of an individual training program.

Eleven of the twelve objectives carry performance criteria of 90% accuracy. The sole exception, the rotation of trainer's attention to the students in the activity area, has a criterion of 100%. These relatively high criteria were chosen as a means of insuring consistency in training techniques and in the hopes of facilitating maintenance of training skills.

Generalization of the Model

For a typical cottage (about 25 staff), there are four training weeks in the BTC classroom. Following this training, the BTC instructors accompany the trained staff back to their work area and begin a three-week period known as "followup." During followup, the BTC and cottage staffs work together to insure that the model is fully implemented within the cottage. Followup begins with the BTC instructors and cottage supervisory staff targeting specific objectives, based on the results of a standardized cottage assessment checklist completed by the BTC staff.

Also during followup, the BTC staff observes cottage staff conducting individual, group, and mealtime training programs with the cottage residents. The instructors rate training performance and give feedback the same as in the classroom as a means of generalizing classroom skills to specific work duties.

At the end of the followup period, the BTC staff again conducts a cottage assessment, pinpointing specific strengths and deficits regarding the model's implementation in the cottage. From this information, a final list of recommendations for cottage supervisory personnel is prepared. Following the BTC's intervention, assessments by supervisory staff continue on a quarterly basis A training specialist in each cottage assesses individual trainer's performance each month, and these assessments are included in the overall work evaluation of the trainers.

TO BE CONTINUED NEXT ISSUE

DATE	PROGRAM	LOCATION	SPONSORS
Oct. 13	Suicide: The Preventable Disease	Eastern Mt. College Student Union Bldg.	The School of Extended Studies & Community Service—EMC, Billings
Oct. 19-20	Dynamics of Management Fee: $60.	Sam Mitchell Bldg. Room 136, Helena	T. Gary Curtis, Admin., Job Service & Training Div., Dept. of Labor & Industry 449-4500
Oct. 21-23	The Young Adult Chronic Patient: New Perspectives Fee: $175.	University Religious Conf. Ctr. 900 Hilgard Ave., UCLA	Dr. Michael Kirshner—The Information Exchange on Young Adult Chronic Patients, Inc., Spring Valley, N.Y. (914) 354-0200 X2386
Nov. 12-13	Advanced Techniques Workshop on Systemic Behavior Change of Developmentally Delayed Children	Billings Sheraton Hotel Billings	Behavior Change Workshop ASIEP Education Co., Portland, Or. (503) 281-4115
Nov. 17-18	Assessing and Treating Depressed and Suicidal Clients	Park Plaza Hotel, Helena	Center for Continuing Education U of M, Missoula— Janet Wollersheim, Presenter
Dec. 12	Seminar for Secretaries and Administrative Assistants Fee: $165.	Copper King Inn, Butte	Associated Management Institute, Inc. 1160 Homestead Road, Santa Clara, California 95050
Jan. 12-13	Assessing and Treating Depressed and Suicidal Clients	Copper King Inn, Butte	Center for Continuing Education U of M, Missoula Janet Wollersheim, Presenter
Jan. 27-29	Eighth Annual Univ. of Utah Seminar on Sexual Function/Dysfunction	Yarrow/Holiday Inn at Park City, Utah	Conferences and Institutes University of Utah—DCE Salt Lake City, Utah (801) 581-5809

KUDO KORNER

John Nesbo was the recent recipient of an award for outstanding individual in the field of mental health in the Rocky Mountain Region. The presentation was made by the Region VIII Council of Regional Mental Health Boards, Inc. at their 1983 Conference at Big Sky, Montana.

John has served on the Region II Governing Board since 1974 and has been a Toole County Commissioner for eleven years. He has become one the state's most effective advocates for comprehensive community mental health, and has lobbied extensively for mental health programs on both the state and national level. His efforts on behalf of quality mental health have become so well known that he is often referred to as "The Mental Health Commissioner."

In 1979 John was elected to serve on the National Council of Community Mental Health Centers as a Community Director representing the six states comprising Region VIII. He was the first elected official in the nation to serve in that capacity. Subsequently, he was appointed to serve on the Executive Committee, the Bylaws Committee and the Public Policy Committee. His work on each of these committees strengthened the National Council and served to increase its effectiveness. He is also a member of the National Association of Counties and has served on its Mental Health/Mental Retardation Task Force.

In February 1982, John was elected Chairman of the State Council of Regional Mental Health Boards, Inc. He appointed a Legislative Committee and spent long hours working with the committee to formulate and carry out legislative goals and objectives. His assistance has been invaluable in developing a joint survey by the Montana Association of Counties and the State Council. which assesses county expenditures for mental health care.

On a state level, John has served one previous term as President of the State Council of Community Mental Health Center Boards and is a past president of the Montana Association of Counties. He has served two terms on the Association's Human Services Committee.

John Nesbo has worked hard to help create a strong, comprehensive community mental health system in Montana. He has actively encouraged citizen participation through local advisory boards and is an ex officio member of the Toole County Advisory Board. John Nesbo has a deep commitment to maintaining mental health services on a local level, especially in rural areas.

John Nesbo, your commitment and dedication to mental health have been of benefit to many, many people and are appreciated by all.

350 copies of this public document were published at an estimated cost of 37¢ per copy, for a total cost of $130.10, which includes $110.00 for printing and $20.10 for distribution.

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MONTANA DEPARTMENT OF INSTITUTIONS

DIVISION MENTAL HEALTH AND RESIDENTIAL SERVICES NEWS

VOLUME 2 | DECEMBER, 1983 | NUMBER 5

Capital Capsule

The Governor has called a Special Session of the Legislature to resolve the Veteran's preference dilemma which has confronted the State since the "Crabtree" decision. The session will convene on December 12 in Helena.

The new telephone system has been installed at the Department of Institutions. The number for the Mental Health and Residential Services Division is now 444-3964. We are still working out some of the "bugs" so hope you will be patient if your call does not go through immediately. If you frequently work with an individual at the Department of Institutions, you should obtain that person's number for his/her direct line.

The first phase of the support services reorganization at the Department of Institutions has taken place with the "pooling" of the secretaries from the Alcohol and Drug Abuse and Mental Health Divisions into one office on the second floor, and secretaries from the Corrections Division and Director's Office into one office on the first floor. Further changes are expected after the first of the year to improve the utilization of the clerical support staff and to provide support to the Management Services Division.

Insurance

As a result of legislation passed during the last Session, all insurance companies will be required to provide minimum benefits for mental illness, alcoholism and drug addiction for all group policies in Montana effective January 1, 1984.

Benefits for inpatient mental health care are set at a minimum of thirty calendar days. Outpatient benefits for mental illness, alcoholism and drug addiction, in the aggregate during any applicable benefit period are set at a minimum of $1000. The co-insurance factor for outpatient benefits is set at a maximum of 50%. No consumer should have to pay more than 50% of the cost of outpatient care, up to $1000. Senate Bill 107 sets minimum benefits but ensures the right of consumers to select benefits above the minimum levels established.

Governing Boards

The second in a series of articles for board members taken from ***Basic Training Manual for Board Development*** by Development Associates, Inc.

Composition of a Board

A Board is essentially a group of individuals working together, therefore, its effectiveness and strength will depend on its composition more than any other single factor. While there is no standard to apply to all Boards, there are a number of basic considerations which any Board should consider in developing itself for its own program.

The effective member of a Board should possess intelligence, judgment, ability to analyze problems and come to rational conclusions, a willingness to identify himself with the organization and program and an ability to speak out independently during Board discussions. Also, an effective member must be an individual with high personal integrity who understands the attitudes of those he/she represents and is obliged to serve.

The size of the Board varies depending on the size of hte program and on the type of representation the Board feels it must have in its members. Studies taken on the size of Boards show that a five-member Board is a minimum size of an effective Board, and that those over thirty-six members are generally too large to work as an effective group.

Role of Consumer

The Board must decide what type of representation it feels is necessary for input and support of its program. It must also keep in mind the minimum federal standards regarding the percentage of the consumer representation.

A ***Consumer*** is anyone who ***uses the services*** of a program meeting the criteria set forth in the federal or local guidelines, ***and who cannot otherwise pay for the services offered by the program.***

A ***Consumer Advocate*** is one who ***represents*** what the consumer desires, ***speaks for or with the people*** and ***is identified by the consumer to represent them.***

A ***Consumer Delegate*** is one who may be a user of the services but not necessarily meet all criteria set forth in federal or local guidelines but who the consumer feels can play a major role in policymaking, decisionmaking and who has the concern and interest of the consumer at heart. Someone who will be heard and who will make sure the program or services include what the people want. These are called power people—dynamic, action oriented, possibly agency representatives.

The Nature of Corporations

To incorporate means "to form a body". A corporation is a body created by law which acts in the business world as a single person. A corporation can sue or be sued, borrow money, negotiate contracts, and do many things a person can do.

To form a corporation, one or more people must apply to the state for permission to incorporate. This is usually done by filing Articles of Incorporation with the proper state agency. These Articles must list the purposes for which the corporation is formed, whether it is ***profit or non-profit***, its location of business, and the name of its officers. The corporation also needs By-Laws which include who the owners or members may be, their responsibilities, and any other important information such as permanent committees, whether or not there will be a paid executive officer, and his/her responsibilities and relationship to the board.

A corporation may be formed by one person (in some states), a few people, or a great many people. Regardless of the number of owners or members, it acts as one person. The two main points to remember about corporations are:

1. ***No single member of a corporation can be held responsible for the actions or debts of the corporation.*** If the organization is not a corporation, the individual members could be sued and would have to pay the debt out of their own pockets. If the organization is a corporation, the individual members cannot be held responsible for the corporation's debts.
2. ***No single member of a corporation can speak or act for the corporation unless a majority of the members give him the authority to do so.*** Since a corporation is considered an individual, the members or "parts" of that individual have no authority to act on their own. Action would require at least half of the members to join with an individual to make a majority.

Corporations are generally governed by a Board of Directors elected by the owners or members of the corporation; and these boards are responsible for setting policies, hiring employees and acting in the best interest of the corporation.

Non-profit Corporations

Non-profit corporations have many things in common with profit-making corporations. The main differences are that while the purpose of a profit-making corporation is to make money, ***the purpose of a non-profit corporation is to achieve educational, charitable, and cultural goals.***

A non-profit corporation may obtain funds in a variety of ways. Foundations, individuals, government agencies, private agencies, and businesses may give donations or contributions. The non-profit corporation may engage in certain kinds of activities for which it is paid. It may invest its money to earn dividends or interest which can be used to support the activities of the corporation. However, the non-profit corporation cannot use the money it makes to provide profits for individuals. It cannot sell shares of stock to raise money. Consequently, the non-profit corporation does not have owners in the same sense that a profit-making corporation does. It has members, and the rules of membership are usually broadly defined by its articles of incorporation and established by its board of directors in the by-laws.

One important feature of non-profit corporations is that they are taxed differently from profit-making corporations, and the tax laws provide two special advantages for them:

1. A non-profit corporation may apply for tax-exempt status which means that it does not have to pay taxes on any money it receives.
2. Persons who donate money to a non-profit corporation can deduct the value of this contribution from their income when they pay taxes.

To receive these tax benefits, a non-profit corporation cannot engage in certain activities. The most important limit is that a non-profit corporation cannot become involved in political activities. It cannot contribute money to the political campaigns, or expend money in an attempt to influence the public or legislators on political issues. This limitation is particularly important to an organization involved in community action.

(Continued from last issue)

The Boulder Training Model: An Assessment of its Maintenance

By: Timothy Plaska, James Burgess and Mary Tillema

Results

Since January 1, 1976, the Boulder Training Center has trained approximately 700 staff at the average cost of $325 per trainee. Sixty-eight percent of these staff were direct-care workers, while the remaining 32% were administrative, support or professional staff. During training, each trainee was required to meet criterion on 12 training objectives. Of these 12, nine were chosen for discussion in this report because of their relationship to the direct training duties of direct-care staff.

Of the entire population of direct-care staff trained, 195 were randomly selected from Boulder Training Center (BTC) training files, and the mean scores were compiled on their "first" and "best" attempts at each of the nine objectives. It is important to note that the first attempt scores here are not true baseline scores, since each trainee had received verbal instructions, a videotape model, and a live demonstration of the behaviors prior to his or her first attempt.

Objectives	First Attempt	Best Attempt	Mean % Of Change
1:1 Cues	76.0%	98.7%	+ 22.7%
1:1 Consequences	71.6%	98.2%	+ 26.6%
1:1 Data Recording	85.9%	99.8%	+ 26.6%
Group Cues	81.6%	98.1%	+ 16.5%
Group Consequences	80.3%	96.9%	+ 16.6%
Group Rotation	55.0%	98.5%	+ 43.4%
Terminology	78.9%	94.8%	+ 15.9%
Updating	80.9%	91.6%	+ 10.7%
Incidental Interactions	80.6%	95.4%	+ 14.8%

On each of the nine objectives examined, an increase was observed from the first attempt scores. The objectives showing the largest increases all related to practical, or "hands on", training objectives.

During follow-up periods, the BTC instructors assisted the newly trained staff in the generalization of their skills to training duties in the actual work areas. Overall, 74% of direct-care staff met all 1:1 program objectives on their first evaluation in the cottage; 92% met all group program objectives on their initial follow-up observations, and 88% met criteria on the appropriateness of incidental interactions on the initial follow-up observations. Reliability between observers during the follow-up observations was consistently above 90%.

Maintenance of the Model

The BTC spent nearly three years training the staff from 15 separate cottages. The BTC staff returned to these cottages during December of 1978 and January of 1979 to determine the level of maintenance of these training skills. The same tools that were used to evaluate trainees during the classroom and follow-up phases were also used in the maintenance evaluation.

In the maintenance evaluation, 23 trainers were observed, and the mean scores for each of the nine selected objectives were compiled. In addition, the group's mean classroom scores for the first and best attempts on each objective were compiled. These data are presented below.

Objectives	First Attempt	Best Attempt	Maintenance Score
1:1 Cues	64.8%	98.3%	80.4%
1:1 Consequences	67.9%	96.9%	71.0%
1:1 Data Recording	92.2%	100.0%	93.0%
Group Cues	75.3%	98.3%	84.7%
Group Consequences	80.4%	96.7%	82.0%
Group Rotation	52.5%	100.0%	85.7%
Terminology	75.0%	95.5%	84.7%
Updating	76.3%	94.3%	
Incidental Interactions	85.2%	95.4%	88.9%
Mean	74.4%	97.3%	81.4%

On each of the nine objectives examined, increases were observed between the first attempt and best attempt scores. The increases for all objectives ranged from 7.8% to 47.5%. The maintenance evaluation scores generally dropped to a level that was slightly above the first attempt scores.

Discussion

The Boulder Training Model offers several advantages over traditional staff development programs: 1) it is a complete system of staff and resident training that is less likely to be affected by a high staff turnover rate; 2) it has as a cornerstone, an efficient demonstration classroom that can teach all aspects of the model to any employee in one intensive week of training; 3) the model is data-based, eliminating the guesswork from treatment and management decisions; and 4) the model is relatively inexpensive when compared to the alternative cost of hiring an adequate number of professional therapists.

In addition, as part of the model, the Boulder Training Center overcomes several problems inherent in most traditional staff development programs. First, the BTC teaches the actual behaviors expected of staff in the work area. In traditional staff training programs, students are often taught verbal skills that they must then translate into performance skills for application in the work environment. Second, most training programs stop after the class ends, with the assumption that skill generalization will occur naturally. BTC training ends in the actual work environment, three weeks after classroom training. This follow-up makes it more likely that generalization will occur and that the model will be effectively implemented. Finally, the issue of consistency within and across staffs is addressed by centralized staff training and monitoring of their performance.

The data that have been collected to assess the effects of the BTM indicate that it is an effective method of training employees to conduct habilitative training programs and of assisting them to generalize those skills to a variety of work environments within the institution. The evaluation of the maintenance of trainers' skills indicates some loss of skills over time. However, on seven of the nine objectives, the trainers' scores were still above those achieved on the first classroom attempts, which were preceded by instructions, video-tapes, and live models. The mean scores received on the academic and practical objectives at the maintenance observation was 81.4%. Although this was less than the desired 90% criterion, these results suggest that the training has positively affected employees' training skills.

An analysis of the monitoring and feedback systems of the model in the cottages is needed, and modifications must be made so that trainers will consistently meet or exceed the 90% criterion in their work areas.

Trainee feedback relating to the quality and usefulness of the training project has been positive, and, since the implementation of the model, the amount of habilitative training provided to the residents by direct-care staff has steadily increased. (These data are included in the complete version of this paper and available upon request.)

COMMUNITY MENTAL HEALTH CENTERS

Eastern Montana Mental Health Center

Jim Petersen, Administrative Officer at the Miles City office, has submitted his resignation to be effective December 31, 1983. He will be moving to Minnesota.

Jim Jensen will become the Data Processing Manager/Administrative Officer effective January 1, 1984. Norma Hecker will be replacing Jim Jensen as Business Manager effective January 1, 1984.

Golden Triangle Mental Health Center

Robert Weber will be employed as the new Clinical Psychologist in the Cut Bank office starting November 28th. He is replacing John Melchert, M.D. who left to become head of an outpatient unit at a mental health center in the State of Washington.

Linda Hatch has been hired as Personnel Officer for the Center. She will replace Jo Hall Salina who will be leaving on November 30 to become a mother. Jo will be missed by all who worked with her.

The Mental Health Center and the Great Falls Mercy Home will co-sponsor workshops on November 21st for law enforcement officials and people involved in criminal justice on domestic violence. Jan Dybdal will address batterers and Cheryl Borchers, Director of Mercy Home, will speak on victims of battering.

New Directions Center has received $250 from Cascade Community Mental Health for Christmas Presents. A Christmas Party is planned for December 23.

South Central Montana Regional Mental Health Center

Fundraising for the relocation of Rainbow House will be a major focus of attention for Region III in December and the upcoming year. A new facility is needed by next June to house this day treatment program. A committee of Center staff and community representatives is searching for land on which to build a new structure. The private residence now in use is no longer adequate for the more than 70 long-term mentally ill enrolled. The new facility will be designed to meet current and growing needs of this patient population.

A class on "Emergencies" is being held once a week at the Central Office and will continue for 33 weeks. The class is being sponsored by Eastern Montana College and taught by Mental Health Center staff.

A Region III all-staff retreat took place in October outside of Red Lodge. Its focus on "team-building" and "problem identification" brought about a flurry of new activity that will continue into the new year. Many recommendations that were made at the retreat have already been initiated. Internal restructuring is occurring in some areas and many new teams have been formed where problem-resolution is taking place.

"Raising Responsible and Motivated Kids" was the topic of the year's annual public meeting. The Center's newly developed brochure made its debut at the same time. The brochure resembles a school notebook and folds out to an inside poster of a grown man intently studying at a school desk. The message states, "Life is Not A Test. It's O.K. to Ask for Help."

Southwest Montana Mental Health Center

The Mental Health Center was the recipient of a $4,000 donation from Zeke's Distributing Company which was used to purchase a new van for the Montana House Day Treatment Program.

Cliff Nelson has been appointed as Granite County representative to the Region IV Governing Board. He replaces Phil Jemison who has resigned.

Dr. William Van Duyne, clinical director for the Butte Satellite Office, has resigned. He will be employed at the V. A. Hospital in Sheridan, Wyoming.

Greg Barisich, MSW has been employed by the Center to work half time in the Sexual Offender Program and half time with children.

Region IV is in the process of implementing thier grant for the unemployed at the Anaconda Office. A mental health professional will be placed in the Anaconda area to provide outreach services, referral, and direct services to persons suffering distress, depression or emotional illness as a result of unemployment.

Western Montana Mental Health Center

The Mental Health Center is very pleased to have received the deed to the land and buildings the Missoula outpatient staff has been using at Fort Missoula. Twenty years ago, an application was submitted to the Federal Surplus Property Bureau for use of the facilities and land. With the maturity of the deed, the Center now has unrestricted use. Four buildings and 6.03 acres of land were transferred officially to the Center in August. Thousands of dollars have been saved over the years by using this property and the Center is delighted to now own it outright.

Region V is also gratified to have been awarded a $32,493 contract through the Department of Institutions under the Federal Emergency Jobs Bill. The Center plans to provide direct services to the unemployed who participate in the World of Work Training Program at the Missoula Vocational Technical Center. They will also provide fourteen regional workshops dealing with mental health issues related to unemployment. The project is a good opportunity, not only to provide crisis intervention services, but also for regional exposure of the mental health center to a large group of residents in the region who may not be familiar with the Center's program.

Staff and members of the Kalispell-based Day Treatment Program, Lamplighter House, are now commuting in a bus recently purchased in Butte. The Anaconda Company placed all of their vehicles on the auction block and the Mental Health Center made a successful bid. After a few repairs, the Center has a good bus and feel they made a good investment.

From The Field

INSTITUTIONS

Center for the Aged

The residents at the Center for the Aged are now able to enjoy the results of staff efforts to improve the environment at the Center.

The Support Services Department recently made arrangements for two mature trees to be placed in two of the courtyards that had no trees. In addition to making the courtyard more scenic, the trees will provide shade for the residents during the summer months. The trees are about ten inches in diameter and have an average height of twenty feet.

The Dietary Department is in the process of redecorating the Residents' Dining Room. The walls have been decorated with new wallpaper and a brown wooden trim. The ceiling will be lowered to approximately ten feet and modern light fixtures will be installed above luminous light panels. Each of the tables will have new formica tops installed in a variety of colors. The tables have also been rearranged to allow for four to six residents at each table. This provides for more space for each resident. The total meal time capac-

ity in the dining room has been reduced from 199 residents to 60, to allow for increased socialization and reduced noise level by providing three meal time servings.

The Nursing Services Department is now providing hanging plants in the main corridors and resident lounges. These plants help to brighten up these high traffic areas and are enjoyed by all.

Montana State Hospital

Jeanne Puccinelli retired on October 28, 1983, after more than 26 years of service. She was hired as a clerk in Administration and at the time of her retirement was an Accounting Technician in the Business Office.

During the month of October, Montana State Hopsital hired two Licensed Practical Nurses and two Psychiatric Nurses. Termination for the same period included Loren Kenny, Food Service Manager V and Keith Barkell, Licensed Practical Nurse III.

During Fiscal Year 1983 there were a total of 2,575 admissions received at Montana State Hospital and 2,415 discharges.

Warm Springs Campus and Galen Campus each had their own kitchen area until October 18, 1983 when the two areas were combined into one operation. Food is prepared at the Warm Springs Campus and transported via heated trucks to the Galen Campus located four miles away.

A Recognition Reception was held at the Galen Campus to honor approximately 350 employees. Certificates were awarded to employees completing eight hours of continuing education; to employees completing thirty hours of Special Duty Aide classes; employees serving on various committees, and to employees working on special projects involving patients.

Montana Veterans' Home

The Montana Veterans' Home is preparing for its annual Christmas Party which will be held on December 21, 1983, at 7:00 P.M. The Christmas Party is funded through donations which are received from the veterans organizations throughout the state. Each of the members of the Home will receive a gift through funds which are administered by the Memorial Fund. Santa Claus will be there to distribute the presents. The high school choir will perform Christmas selections as part of hte entertainment and Jean Warner will play the organ. During the afternoon of Friday, December 23, the staff of the Montana Veteran's Home will present skits for the entertainment of the members.

Jennie Ladenburg, R.N., who has been Director of Nursing since the nursing home opened in 1974, has retired due to a disability. The employees at the Home purchased a recliner for her retirement and a party is being planned for later in the year.

Helen Latch, one of the members of the Home, was recently awarded a 50-year membership pin in the Eastern Star and life membership from Anna Smalley Chapter #112 at Grass Range. The membership and pin were presented by Florence Gaffaney, Worthy Matron, Estella Pomeroy Chapter #68.

A baby shower was held recently for Laurie Thramer. Laurie is the third generation of her family to work at the Montana Veterans' Home. Her grandmother, Mrs. Emerald Smithey, worked at the Home in 1967. Jacqueline Armstrong, her mother and daughter of Mrs. Smithey, has worked at the Home for the last nineteen years and Laurie has been employed there for two years.

The State V.F.W. Auxiliary brought a group of eight Montana Fiddlers to the Home on November 17 to entertain the members. Forty of the members attended.

DATE	PROGRAM	LOCATION	SPONSORS
Dec. 2	Assessing Training Needs	Cogswell Bldg., Room C-209	Dept. of Administration Personnel Div. 444-3871
Dec. 7	Coping With Unemployment Keeping the Family Together	Triple E Room, Chinook	Employment Counselor—Havre Job Service Office 265-5847
Dec. 7	Time Management for Support Staff Fee: $20.00	Sam Mitchell Bldg., Room 136	Linda S. Rickman, Personnel Spec., Dept. of Admin. 444-3871
Dec. 12	Seminar for Secretaries and Administrative Assistants Fee: $165	Copper King Inn, Butte	Associated Management Institute 1160 Homestead Road, Santa Clara, Calif. 95050
Dec. 13-15	Personnel Practices for Supervisors Fee: $90.00	Sam Mitchell Bldg., Room 136, Helena	Dept. of Administration Personnel Div. 444-3871
Jan. 12-13	Assessing and Treating Depressed and Suicidal Clients	Copper King Inn, Butte	Center for Continuing Education U of M, Missoula Janet Wollersheim, Presenter
Jan. 27-29	Eighth Annual Univ. of Utah Seminar on Sexual Function/Dysfunction	Yarrow/Holiday Inn at Park City, Utah	Conference and Institutes University of Utah—DCE Salt Lake City, Utah (801) 581-5809
Mar. 22-23	Assessing and Treating Depressed and Suicidal Clients	Rainbow Hotel Great Falls	Center for Continuing Education U of M, Missoula Janet Wollersheim, Presenter
June 21-22	Assessing and Treating Depressed and Suicidal Clients	Orange Street Inn Missoula	Center for Continuing Education U of M, Missoula Janet Wollersheim, Presenter

KUDO KORNER

It is our pleasure to honor Richard Heard, Superintendent of Boulder River School and Hospital (BRSH). Dick began his career at BRSH in June of 1962 as an Attendant Counselor I. After being promoted to several supervisory positions in the Habilitation Department, he was named Assistant Superintendent in December 1975. He was appointed Interim Superintendent in July of 1978 and was permanently appointed by the Department of Institutions as Superintendent of BRSH in May of 1979. It was through Dick's ability, determination and knowledge that he worked his way up through the system from an Aide to becoming Superintendent. This has been a real asset to Dick as he really understands the complex issues and problems that confront the residents and employees.

Dick is a determined and organized person and has systematically stimulated the development of methods and activities which make BRSH a better place to work and live. One of Dick's most outstanding qualities is his real devotion to the residents at BRSH. His decisions are based on the needs and desires of the residents and how they will best be served.

Ten to twelve hour days are the rule rather than the exception for Dick. He has spent many weekends and nights at BRSH and spends Christmas Day distributing gifts to the residents.

Dick was honored in 1979 by the Montana Association for Retarded Citizens for his professional services that have benefitted the developmentally disabled. He is certified as a professional person in the DD field and is a licensed nursing home administrator.

Dick was in the U.S. Army from 1956 through 1962 where he was assigned to Quartermaster Ordinance and Guided Missile Sections. He met his wife, Fran, while stationed in New Jersey. He currently resides in Boulder and spends his leisure time camping, bowling and attempting to w n an occasional game of horseshoes. Please know your hard work and devotion are noticed and appreciated, Dick.

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